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MEDICARE HOSPITAL INFORMATION

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Volume 50

VIRGINIA

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FOREWORD

The mission of the Health Care Financing Administration (HCFA) is to promote the timely delivery of appropriate, quality health care to the nation's aged, disabled, and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible, and that agency policies and actions promote efficiency and quality within the total health care delivery system.

To that end, the annual release of the Medicare Hospital Information report is a key element in our continuing efforts to improve the effectiveness of medical practice and the quality of care provided to Medicare beneficiaries. It is also an important step in helping beneficiaries make more informed health care decisions.

The information in this release is not intended as a direct measure of quality of care. It is best used as a "screening tool"—that is, to identify potential problems for further review and, in consultation with medical staff, to evaluate a hospital's strengths and weaknesses. Thus, we believe that consumers can use this information to ask questions of their physicians, rather than reach judgments about the quality of care in a particular hospital. We also expect this information to be used by hospital administrators, physicians, peer review organizations, State survey and certification agencies, and researchers.

This publication presents information to answer the question "What is the actual mortality rate within a certain period of time for each hospital compared to the rate that would have been predicted, given what we know about the characteristics of the patients admitted?" Our basic approach to analyzing hospital mortality information has remained unchanged for the past five years; however, since the last publication of mortality information in May 1991, we have made some significant changes both in our methodology and in the way we display the results of our analysis. The four principal changes in the 1992 report are:

- A graphic presentation of the predicted and observed mortality rates for most hospitals for "All Causes" for Federal fiscal years 1988-1990 at 30, 90, and 180 days;

- The addition of information on certain variables that we use in computing the predicted mortality rates for each hospital;

- The addition of information on the geographic origin of each hospital's patients; and

- A comparison of the average length of stay in each hospital with the average for the State and Nation.

These refinements should make this information an even more valuable educational tool to help improve the quality of care in hospitals. The changes were reviewed by a panel of outside experts. The methodology used to calculate the observed mortality rate, the predicted mortality rate, and the standard deviation are briefly described in the Technical Information section of the Introduction to this volume and in more detail in the Technical Supplement (Volume 55).

We acknowledge the assistance we have received from the American Hospital Association—not only for providing the information detailing selected hospital characteristics, but also for alerting its members to the importance of this information. We are also grateful to the personnel in each hospital who took the time to review the data thoroughly and to provide us with comments and suggestions. As before, we have published individual hospitals' comments in their respective State volumes. Over the years, these communications have helped to improve and refine the information included in this publication.

HCFA is committed to improving the Medicare Hospital Information report. To that end, we are continuing to work with representatives of hospital, consumer, employer and other organizations to make this annual report as useful as possible for all consumers.

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INTRODUCTION

The Medicare Hospital Information report contains information on acute care hospitals that treated Medicare patients discharged in Federal fiscal year (FY) 1990 (October 1, 1989—September 30, 1990).

This year's publication set consists of 54 State volumes and a Technical Supplement (Volume 55). There is one volume per State, except that California and Texas have two volumes each, Hawaii is combined with American Samoa and Guam, and Puerto Rico and the Virgin Islands are combined together in one volume.

Each hospital's two summary data pages are arranged alphabetically by hospital name in each State volume. These data pages consist of:

- The hospital's FY 1990 Medicare hospital mortality rates;
- A graphic presentation of the predicted and observed mortality rates for **most** hospitals for "All Causes" for FYs 1988—1990 at 30, 90, and 180 days;
- The FY 1990 values for selected explanatory factors used to predict the mortality rates;
- Origins and lengths of stays of Medicare admissions; and
- Hospital characteristics, such as the number of beds and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals files or, when such information was not available from the AHA file, the Health Care Financing Administration's (HCFA) Online Survey, Certification and Reporting System (OSCAR) file.

> ***Please note that the information regarding origins and lengths of stays and hospital characteristics are presented strictly for information purposes only. They were not used to calculate the hospital's predicted mortality rates.***

Toward the end of each volume, we include both State and national mortality rates developed by our analysis, as well as the comments we received from individual hospitals.

DESCRIPTION OF MORTALITY INFORMATION

The mortality rates at a given hospital may reflect, among other factors, the age, sex, diagnoses, and severity of illness of patients admitted to that hospital, as well as the quality of care they received. Factors affecting health and the probability of death vary among the patient populations served by individual hospitals. Consequently, the mortality rates in different patient populations vary considerably.

These latest analyses of the mortality rates associated with Medicare hospitalizations are similar to those carried out in the four prior years. Only one hospitalization for every patient was used. As in last year's analysis, when a patient had multiple hospitalizations during the fiscal year, one stay was selected at random to be analyzed. We believe that the use of the randomly selected admission provides a better representation of a typical hospital admission and permits us to calculate mortality rates more nearly like those the hospital itself would calculate for its patients.

Although we publish data only on deaths which occur within 180 days of admission to the hospital, for purposes of analysis our methodology actually considers deaths which occur any time within 365 days of admission (with the exception that no date of death later than April 1, 1991 is used). This is part of the formula which assesses the long-term risk of mortality. With this approach, information about the early and later results of the hospitalization is provided. This is important because diseases evolve with different time courses, and treatments may have different short- and long-term effects. The choice of at least 180 days allows substantial followup consistent with timely reporting of HCFA data.

We again analyzed the data on a fiscal year, rather than on a calendar year, basis because it allows us to report on recent hospitalizations. Also, new Medicare rules are often instituted on a fiscal year basis.

For each hospital, mortality rates are presented for overall Medicare patient mortality and for eight medical conditions and nine procedures. The information consists of the number of Medicare patients; the observed or actual mortality rate (OBS); the predicted mortality rate (PRED), given the mix of patients; and a standard deviation (SD), a measure of the uncertainty of the predicted rate.

The following information will be helpful when reviewing specific information for any given hospital.

Number Of Cases

This is the number of individual Medicare beneficiaries whose discharge in a fiscal year from the short-term, acute care hospital listed was selected for analysis. The total number of cases randomly selected for each hospital is presented under the category "All Causes." The eight medical condition and nine surgical procedure categories are subgroupings drawn from the "All Causes" selection. Although a particular patient may appear in only one of the eight medical condition categories, that same patient may also appear in one or more of the nine surgical procedure categories. Similarly, a patient may appear in one or more of the nine surgical procedure categories, even though he or she was not included in any of the eight medical condition categories.

The categories chosen for display represent HCFA's interpretation of the categories judged to be important by various outside advisors including the Institute of Medicine. The listed condition and procedure categories do not cover the reason for admission of all the hospitalized Medicare patients in this study. (The ICD-9-CM codes included in each condition and procedure category appear in Table 1 following this Introduction section.)

These conditions and procedures represent the causes for the hospital admission and/or surgical episodes during that stay; they do not necessarily represent the cause of death. HCFA does not have access to cause of death information.

Observed Mortality Rate (OBS)

The observed mortality rate for each category is the percentage of each acute care hospital's selected Medicare patients who died within 30, 90, or 180 days of the selected admission. This rate does **not** represent the percentage whose death was caused by a particular condition or procedure.

The percentage is rounded to the nearest one-tenth of one percent. Both inhospital deaths and deaths occurring after discharge but within 30, 90, or 180 days of admission are included. For example, if a hospital had 1,000 patients included in the "All Causes" category and 124 of these patients died within 30 days of the selected admission, the 30-day observed mortality rate would be 12.4 percent; if an additional 17 patients died more than 30 but less than 91 days after admission, the 90-day observed mortality rate would be 14.1 percent; and if an additional 13 patients died more than 90 but less than 181 days after admission, the 180-day observed mortality rate would be 15.4 percent.

It is important to note that the observed mortality rate is cumulative; e.g., the 90-day observed mortality rate includes all deaths which occur within 30 days of admission, as well as those occurring more than 30 and less than 91 days after admission.

Predicted Mortality Rate (PRED)

The predicted mortality rate for each hospital's patients is derived in part by determining, based on national experience, the contribution to the probability of dying associated with various patient characteristics such as:

- Principal diagnosis (grouped into 23 analytical risk categories),
- Age,
- Sex,
- Previous hospital admissions within the prior six months,
- Admission source (e.g., physician reference, skilled nursing facility reference),
- Admission type (e.g., elective or emergency), and
- The presence of up to seven comorbid conditions—cancer, chronic cardiovascular disease, chronic renal disease, chronic liver disease, chronic pulmonary disease, cerebrovascular degeneration, and chronic diabetes. A list of the ICD-9-CM codes defining the comorbid conditions is in Table 2 following this Introduction section.

Standard Deviation (SD)

The standard deviation is a tool to gauge the extent to which the difference between the observed and predicted mortality rate is meaningful. In general, the greater the difference between the two rates, the greater the probability that the difference represents an actual variation from what would be expected in view of the national experience. The less chance that the difference between the PRED and the OBS can be attributed to statistical variability, the more grounds for possible concern about the institution's performance.

Information on how to use the SD to construct prediction intervals for use in assessing the real difference between the OBS and the PRED is included in the Technical Information section of this Introduction. The precision and interpretability of the estimates are weaker when there are no deaths or 50 or fewer cases in a particular category being analyzed. Thus, for these instances, dashes ("---") are placed in the SD column.

Observed Mortality Rate And Predicted Range For Medicare Patient Admissions For All Causes

Also in this year's report, we have presented graphs that display the information for most hospitals described above for FYs 1988 and 1989, as well as FY 1990. (In particular, these graphs could not be computed for hospitals that had 50 or fewer cases or no deaths in FYs 1988, 1989, or 1990). In constructing the graphs, we used 2 times the standard deviation to approximate a 95 percent prediction interval. The observed mortality is shown as a dot (•). The predicted mortality is shown at the middle of a range of mortality rates. The bottom of the range is the predicted mortality minus twice the standard deviation, and the top of the range represents the predicted mortality plus twice the standard deviation. The graphs for FY 1988 and FY 1989 are based on new random samples and new computations for this year's report. Thus, the calculations for some hospitals for FY 1988 and FY 1989 may be different from previous releases, because we are including more current data in this year's report.

FY 1990 Values For Selected Explanatory Factors Used To Predict Mortality Rates

This year's report includes the FY 1990 average at each hospital of many of the explanatory factors used to predict that hospital's mortality rates. This information provides a profile of the patients used in the analysis and should help to identify possible systematic coding errors in the claims data used to calculate the mortality rates. These percentages are derived from the patients included in the sample and should be applied to the total number of cases listed in "All Causes." It is important to note that neither the admission sources/types nor the comorbidities categories are mutually exclusive. For example, a patient could be both "referred by his personal physician" and "admitted for elective procedure." Similarly, a patient could have secondary diagnoses of both cancer and diabetes.

Information Sources And Notes

We believe that when the mortality rate information is properly understood and applied, it can be very useful; it can also be misleading if it is interpreted incorrectly. The information simply describes one of several possible outcomes at a hospital—postadmission mortality for Medicare beneficiaries.

Mortality information is not necessarily representative of a hospital's total performance in all aspects of patient care. Individual hospitals may have very good reasons for their rates being higher than the rates predicted by the HCFA model. For example, one hospital might have different death rates than another because its patient mix is not fully accounted for by the model.

Accordingly, we offered each hospital the opportunity to review their specific information and to provide comments to HCFA and the public, and we included those comments that were received timely at the end of this volume. Users should read the discussions about the uses and limitations of the mortality information found on page xiii, as well as any comments a hospital may have provided.

Hospitals In The Analysis

The hospitals included in this analysis are participating in Medicare as short-term, acute care facilities—all have a zero in the third position of their Medicare provider number. All other hospitals—those with something other than a zero in the third position of their provider number, such as rehabilitation facilities or psychiatric institutions—were excluded. This year, as in the past two years, we have also excluded hospices.

In some cases, we have included data for hospitals that closed, changed ownership, or changed management either during or subsequent to FY 1990. Our data included for those institutions reflects the situation as it existed at the time the hospitalizations analyzed occurred.

Data Sources

This report is based primarily on Medicare hospital billing information for Federal fiscal years 1988, 1989, and 1990. While the principal source of the data for the analysis was the HCFA-maintained Medicare Provider Analysis and Review (MEDPAR) file, which contains information about each Medicare hospitalization, some of the information about beneficiaries, such as date of death, was obtained from the Social Security Administration. Hospitals submit bills to HCFA's fiscal intermediaries (which handle claims for the inpatient care provided to Medicare beneficiaries) which, in turn, submit this information to HCFA. The file is updated on a quarterly basis. Our analysis was based on information available following the June 1991 update of the MEDPAR file. It is estimated that by that time (nine months after the close of the fiscal year), 98 percent of all Medicare discharges in FY 1990 are included in the file.

Possible Limitations Of The Data

In any large-scale data base, such as the one dealing with Medicare hospitalizations, there will be gaps or inaccuracies. For example, last year some hospitals had not accurately reported the source or type of admission, and thus erroneous information was included in the analysis for those hospitals. However, the fact that the files contain information on about 10 million hospital admissions to nearly 6,000 hospitals for each year provides some assurance that, for purposes of the statistical analysis conducted here, the information that might be

missing or inaccurate is such a small portion of the total that it would have little effect on the results for national estimates. Nevertheless, it may substantially affect an individual hospital if it were the source of the inaccurate information.

While we feel that the information used in this analysis is thorough and complete, there are a few points to keep in mind as you review the mortality information.

The information used is billing data; it is only as good as the information submitted by hospitals as part of the payment process. Although there is always a possibility that coding errors are included, we assume that, given the link to payment, hospitals have an incentive to submit bills accurately and promptly. We do know, however, that some hospitals submitted incomplete or erroneous data.

For example, following last year's public release of the hospital mortality data, several hospitals wrote to HCFA indicating that they had submitted incorrect data. Furthermore, they stated that if they had given us the correct information, their predicted mortality rates would have been higher than those presented in HCFA's report. Therefore, in this year's report we have annotated those hospitals' data pages with a footnote stating: "This hospital says that it submitted inaccurate data to Medicare and claims that its predicted mortality rate should be higher than that presented above." At this point, however, HCFA cannot confirm the validity of those hospitals' claims. The analysis results might very well be different if the data on which they were based were submitted accurately by those hospitals.

In our previous analysis of mortality data, we discovered that some States had zero admissions from a skilled nursing facility. While some of these problems were corrected on the MEDPAR files used for this analysis, at the time this study was initiated we found empirical evidence that some of the files still contained suspect information. The suspect data were identified by noting those months (date of discharge) and fiscal intermediaries for which the type and source of admission fields appeared to be interchanged. Based on our findings, we reversed these fields to at least partially correct the remaining discrepancies. The following list shows the specific instances for which the fields were reversed for this analysis.

TYPE AND SOURCE OF ADMISSION FLIPPED

FI No.	FI Name	Dates
00030	Arizona Blue Cross	10/01/86 — 12/31/88
00080	Maryland Blue Cross/DC	06/01/87 — 09/30/87
00190	Maryland Blue Cross	06/22/87 — 12/31/88
00400	Texas Blue Cross	12/07/87 — 12/31/88

How To Use This Information

There are several key points to remember about the use of this information. **First, it is important to understand that the difference between the hospitals' mortality rates and the predicted rates in the tables in this report may not be a direct measure of the quality of care rendered in the hospitals.**

Second, the usefulness of this information depends upon the accuracy with which mortality rates can be predicted. We do not currently have any direct measurement tool with which we can fully adjust for severity of patient illness differences among hospitals. For instance, two hospitals may have very different death rates for patients admitted for stroke, even after we have adjusted for age, sex, and several other factors. This might happen because one hospital's stroke patients may consist of a significant number who are admitted in a coma (and are thus more likely to die), whereas another hospital's patient population may represent a broader spectrum of patients with cerebrovascular problems, or because these two hospitals, in fact, do provide different levels of quality of care. In addition, other factors affecting the probability of death in a particular case (e.g., family status/support, overall health status of the patient, etc.) are not included in the predictive model because information on them is not readily available.

Nevertheless, we believe that the information presented in this publication is an important contribution to the health care community and should be helpful to a wide range of individuals and organizations including consumers, hospital administrators, physicians, PROs, and researchers.

Use By Consumers — Some Key Questions

Consumers should read carefully the explanations of the uses and limitations of the information. Listed below are some questions that we recommend a consumer think about before choosing a hospital. Please keep in mind that this is not a comprehensive list, but it should serve to illustrate the types of questions that are important to consider.

- Why are the hospital's observed mortality rates for "All Causes" consistently and significantly above the predicted rates for FY 1990?

- Why are the hospital's observed mortality rates for the condition for which I need treatment or the procedure I will undergo consistently and significantly above the predicted rates for FY 1990?

- How does this hospital's pattern of mortality compare with that of other hospitals in the State and Nation?

- Is the number of cases too small to present a satisfactory picture of the hospital?

- Does the hospital treat a large number of cases in the category for which I need treatment?

- Does the hospital treat a large number of patients who have several co-existing illnesses or who otherwise are likely to be "sicker" than average?

Other Users Of This Publication

Among other users of this publication, we expect that the hospital administrator (in consultation with medical staff) will find the information most useful as a screening tool to evaluate a hospital's strengths and weaknesses. We know that some hospitals and their medical staffs, using established and newly emerging quality assessment techniques, are seeking information that will result in improved health care delivery.

Outside Assistance In Developing This Publication

The development and presentation of the Medicare Hospital Information report continues to be an important part of HCFA's responsibilities in the health care community. To make the information as accurate and useful as possible, over the past several years we have discussed the theoretical framework and statistical approach with a number of nationally recognized technical experts in appropriate fields. Based on their recommendations, we believe that the models used in these analyses continue to be reasonable and appropriate.

In the past, we have conducted validation studies of our methodology. In general, these studies have found correlation between poor quality care and hospitals whose observed mortality rates significantly exceed the rates that would have been predicted. However, we have also found that detailed clinical data which more thoroughly characterize the severity of patient's illness, while they do not materially affect results describing the general pattern of mortality, do, in specific instances, alter our assessment of the comparison of the observed to the predicted mortality rates.

The format for presentation, the process for sharing the information with individual hospitals, and the statistical methodology have been discussed at various meetings with leaders of organizations representing Medicare beneficiaries, physicians, and hospitals. Also, we have spent many months reviewing the comments received from the hospitals regarding their patient-specific data for earlier years and our previous mortality information reports. Many suggestions from these sources have been incorporated into this report.

We have carefully investigated comments from individual hospitals on apparent discrepancies or errors generated in previous years. These discrepancies rarely had an effect on a hospital's overall mortality rate. Most of these instances fell into the following two broad categories.

- **Inaccurate Date of Death** — We found that inpatient billing coding errors (e.g., a hospital bill indicating that the patient's status at time of discharge was "expired" when the patient had, in fact, left the hospital alive) created many of these errors. We now have mechanisms in place that allow a continuous update of HCFA's master file, thereby enabling us to make corrections.

- **Discrepant Case Counts** — Our analysis counts only one acute care discharge in a fiscal year; normally, hospitals count each discharge. Thus, a patient admitted three times in a year would count three times for the hospital, but only once for the purpose of analyzing Medicare hospital mortality data presented in this report.

We believe it is important for consumers of health care to have access to as much information about hospitals as possible when making health care choices. Along with hospital characteristics information, we have added this year information about the origin and length of stay of Medicare admissions. This information is presented for comparative purposes only and was not used in calculating a hospital's predicted mortality rates. These data were not part of the analyses, and any errors or discrepancies in them do not affect the predicted mortality rates.

Origin of Medicare Admissions

Data on the geographic origin of each hospital's patients are presented in this year's report. We obtained from the Health Insurance Master file the State and county of residence for each Medicare beneficiary discharged from a Medicare-certified, acute care hospital during FY 1990. We then compared that information with the location of the hospital to determine the percentage of all discharges where the patient lived within the same city/county as the hospital location, within the State where the hospital is located, or outside the State. The percentages are derived by dividing the number of discharges of beneficiaries in a geographic category by the total number of Medicare discharges from the hospital. Please note that these are percentages of total Medicare discharges, not of the mortality sample alone.

Medicare Average Length of Stay

We obtained from the MEDPAR file the total days of care—both Medicare covered and noncovered—and divided that total by the number of discharges from each hospital. Total, rather than covered, days were used because, under the Prospective Payment System (PPS), if a Medicare patient has at least one day of hospital coverage available to him in the current spell of illness, the hospital will be paid the full diagnosis related group (DRG) amount plus any approved outlier amount, regardless of the number of days actually used.

Example: Hospital A had 2,513 Medicare discharges with a total of 24,379 days.

Calculation: $\frac{24,379}{2,513} = 9.7$ days

The Medicare average length of stay is 9.7 days.

HOSPITAL CHARACTERISTICS

As noted previously, we have again included information on selected hospital characteristics such as the number of beds, occupancy rate, ownership, staffing, and specialty services. This information was obtained from the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals, with the exception of the case mix index (CMI), which was derived from HCFA billing data. This file consists of information voluntarily reported by hospitals to the AHA. In instances where AHA data were unavailable, for example for hospitals that did not respond to the AHA survey, we derived the information from HCFA's Online Survey, Certification and Reporting system (OSCAR). The hospital characteristics and the specific special services listed were selected with the concurrence of the AHA as being those most meaningful to the Medicare population. Information on these specific data elements follows.

AHA Definitions (except for CMI)

Survey and Year — AHA 1990. Source is the American Hospital Association's 1990 Annual Survey of Hospital files.

Profile

Total beds (#) — Number of beds (including subacute beds), cribs, and pediatric and neonatal bassinets regularly maintained (set up, staffed, and ready for use) for inpatients as of the close of the reporting period; does not include bassinets for normal newborn infants.

Occupancy rate (percent) — Ratio of average daily census to the average number of beds (statistical beds) maintained during the 12-month reporting period. (NOTE: The number of these "statistical beds" may differ from the bed count at the close of the reporting period.)

Ownership/control — State government, local government, district/authority, church, private nonprofit, private for profit, or Federal Government.

Medicare discharges — The total number of inpatient discharges for Medicare patients for those hospitals selected for the mortality calculations, including all discharges for persons with more than one hospitalization during the year. (The mortality data include only one randomly selected discharge for each hospitalized enrollee. Therefore, this figure may reflect more discharges than the actual number of cases randomly selected for the mortality study.)

Case mix index (CMI) — A measure of the overall complexity of the Medicare cases treated by a given hospital compared to the complexity of the national average case mix. The CMI represents the relative costliness of each hospital's mix of cases compared to the national average mix of cases. A CMI of greater than one means that a hospital treats more complex cases than average. A CMI of less than one means that a hospital treats less complex cases than average. The CMI for each hospital is calculated on an annual basis. In this report, the CMI presented for each hospital is calculated based on its discharges in FY 1990.

A hospital's CMI is calculated by multiplying the number of cases in each DRG by the relative weight of that DRG, summing the products, and dividing the sum by the total number of cases for the year. For calculating the FY 1990 CMI, use the DRG relative weights published in the *Federal Register*, Volume 54, Number 169, pages 36468 ff., dated September 1, 1989.

Staffing (all AHA counts are as of 9/30/90)

Total number of physicians — Total active and associate medical staff.

Percent of physicians who are board-certified specialists — Physicians who have passed an examination given by a medical specialty board and have been certified by that board as a specialist.

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

Burn Unit — Provides more intensive care to severely burned patients than the usual acute nursing care provided in medical and surgical units. Beds must be set up and staffed in a unit specifically designated for this service.

Cardiac Intensive Care — Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel, and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure,

open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units. Beds must be set up and staffed in a unit(s) specifically designated for this service.

Comprehensive Geriatric — Provides diagnostic and evaluation services that determine elderly patients' long-term care needs. It includes the assessment of medical conditions, functional activities, and mental and emotional conditions, and incorporates these into a treatment plan which includes family and financial concerns as well as medical needs.

Hospice Care — A program providing primarily medical relief of pain and support services to terminally ill patients and assistance to their families in adjusting to the patients' illness and death.

Medical/Surgical Intensive Care — Provides nursing care to adult and/or pediatric patients of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Included are medical-surgical, pediatric, and psychiatric (isolation) units. These units are staffed with specially trained nursing personnel, and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or life-threatening conditions, require intensified, comprehensive observation and care. These units may also include cardiac care when such services are not approved in a distinct cardiac care unit. This category is called "intensive care unit" in OSCAR.

Organ/Tissue Transplant — The hospital has the necessary staff and equipment to perform the surgical removal of a viable human organ or tissue from a donor, either living or deceased, and the surgical grafting of the organ/tissue to a suitably evaluated and prepared patient.

Other Intensive Care — Provides nursing care to adult and/or pediatric patients with a specialized disease or condition of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Examples reported include oncology or spinal cord injuries. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment appropriate for the patients' specialized conditions.

Trauma Center — Provides emergency and specialized intensive care to critically injured patients.

Other Specialty/Hospital-Based Services

Alcohol/Drug — Hospital services for the medical care and/or rehabilitative treatment of outpatients whose primary diagnosis is alcoholism or other chemical dependency.

Rehabilitation — A unit having designated beds and providing a comprehensive array of multidisciplinary medical rehabilitation services.

Psychiatric — Care provided to emotionally disturbed, chronically mentally ill, mentally disordered, or other mentally incompetent patients on the basis of physicians' orders and approved nursing care plans. Beds must be set up and staffed in units specifically designated for this service.

Medicare Swing Beds — The hospital is certified by Medicare to provide "swing bed" services; that is, some acute care beds can be used for skilled nursing facility type care in the hospital for Medicare purposes.

OSCAR Definitions (except for CMI)

Survey and Year — HCFA, most recent year. Data were derived from the Online Survey, Certification and Reporting System (OSCAR).

Profile

Total beds (#) — Total number of operational beds eligible for Medicare payment.

Ownership/control — Church; private, nonprofit; other nonprofit; proprietary; Federal Government; State government; local government; and hospital district or authority.

Case mix index (CMI) — See definition shown in AHA "Profile" section.

Staffing

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

NOTE: There are no specific definitions of specialty services in OSCAR. Characteristics are self-reported by each hospital at initial Medicare certification and recertification, and are generally understood to parallel the explicit AHA definitions (above). The AHA categories "comprehensive geriatric" and "other intensive care" are not available in OSCAR. However, they may be included in the OSCAR category of other specialty services (not shown in table).

Coronary Care — See definition shown in AHA "Specialty Services" section.

Intensive Care Unit — See definition shown in AHA "Specialty Services" section. These units may also include other intensive care units in OSCAR reporting.

Organ Transplant — See definition shown in AHA "Organ/Tissue Transplant" section. May include tissue transplants because there is not a separate field in OSCAR for these services.

TECHNICAL INFORMATION

Data Sources

The data analyzed in this report are obtained from the Medicare Provider Analysis and Review (MEDPAR) file for the fiscal years 1987-1990, which contains information on the hospital stays of Medicare beneficiaries. The principal sources of data for this file are the bills (known as HCFA-1450 or UB-82) submitted by the hospitals to HCFA through fiscal intermediaries. The MEDPAR file also contains data about the beneficiaries, such as age, sex, and date of death, which are obtained from the Social Security Administration, the Railroad Retirement Board, or the Office of Personnel Management.

Hospital stays with discharges in fiscal years 1988, 1989, and 1990 were used in these analyses. Hospital stays in 1987 were used only to characterize the prior admissions of the patients in the 1987 cohort. Only acute care hospital stays in short-term (general and specialty) hospitals were selected. These hospitals have a "0" in the third position of their Medicare provider number. Hospital stays in institutions (designated by a "9" in the fourth position of the provider number) and hospital stays in psychiatric units, rehabilitation units, swing-beds and alcohol/drug units (with "special unit codes" of S, T, U and V, respectively, in the third position) were excluded.

The Mortality Model

For each beneficiary in each year one hospitalization was selected at random. Choosing a specific hospitalization is necessary to avoid multiple counting of the same death for that year. Selecting a random hospitalization instead of the first or last in the year produces mortality rates that are more representative of the rates that a hospital might calculate for its patients. Also, the mortality rates based on this random selection process reflect an intermediate position between the rates produced by the alternatives.

The selected hospital stays were analyzed separately by analytical category. The analytical categories were created by grouping ICD-9-CM diagnosis codes that had similar mortality patterns. The procedures for creating the analytical categories and the groups of ICD-9-CM diagnosis codes that defined them are detailed in the Technical Supplement.

The mortality experience of the patients was evaluated as a function of time within 365 days of the admission. The factors included in the mortality model used to evaluate each patient's probabilities of death are given in Table 3. They consist of demographic characteristics (age and sex), major comorbidities (chronic diseases likely to have been present at admission and believed to

complicate management and increase the likelihood of an adverse outcome), prior admissions (grouped into five risk or severity levels) within the 6 months preceding the admission evaluated, admission type (emergent, elective, etc.), and admission source (referral from the physician's office, the nursing facility, etc.). The specific reason for the admission (the principal diagnosis) and the performance of selected surgical procedures were additional factors used in the estimation of the predicted probability of death (see below).

The observed mortality rate for a hospital was calculated by means of the lifetable method ("The LIFETEST Procedure," Chapter 22, SAS User's Guide: Statistics, Version 5 Edition, pages 529-557).

ANALYTIC TECHNIQUES

A time-to-event or survival model with explanatory or concomitant variables was used to ascertain the influence of the patient characteristics listed above on the probability of death. A feature of such a model is allowance for "right censored" observations. Generally, these are events or outcomes which would have occurred but for some interference that prevents further observation. In the present analysis, "right censoring" occurs when a patient is withdrawn alive from the study April 1, 1991 or at the end of the followup period of 365 days.

The survival function, S(t), is one of several equivalent ways of expressing the model. Another form uses the cumulative distribution function or the mortality function

$$F(t) = 1 - S(t).$$

Another useful formulation of these models is the hazard function, h(t), also known as the force of mortality or risk function. The hazard is the rate of decrease in the number of survivors relative to the number of survivors at a specific time. Mathematically, the hazard function is

$$h(t) = -\frac{1}{S(t)}\frac{dS(t)}{dt} = -\frac{d\ln(S(t))}{dt}.$$

The probability density function, f(t), commonly used in statistical texts can be expressed as follows:

$$f(t) = \frac{dF(t)}{dt} = h(t)S(t).$$

The area under the survival curve is the expected value for t. In some cases, the area under the survival curve is restricted to an interval $0\text{-}t_1$ where t_1 might be one year, for example.

The specific time-to-event or survival model used in the present analysis is Bailey's modification of the Makeham model. The survival function for the Bailey-Makeham model is

$$S(t) = \exp\left\{-\delta t - \left(\frac{\alpha}{\gamma}\right)(1 - \exp(-\gamma t))\right\}$$

where

$$\alpha = \exp(\alpha_0+\alpha_1 x_1+\ldots+\alpha_i x_i+\ldots+\alpha_k x_k)$$
$$\gamma = \exp(\gamma_0+\gamma_1 x_1+\ldots+\gamma_i x_i+\ldots+\gamma_k x_k)$$
$$\delta = \exp(\delta_0+\delta_1 x_1+\ldots+\delta_i x_i+\ldots+\delta_k x_k)$$

are the expressions for each of the structural parameters α, γ, and δ in terms of the k concomitant variables x_i and their associated component parameters α_i, γ_i, and δ_i for i=1, 2,..., k and three intercepts or component parameters α_0, γ_0, and δ_0. The structural parameter δ is the long-term risk which is approached as $t \rightarrow \infty$. The structural parameter α is the initial excess risk which decays with rate constant γ.

For the survival function given above, the risk or hazard function has an especially tractable form of an exponential decay which approaches a long-term risk, δ. The hazard function corresponding to the survival function above is

$$h(t) = \alpha\exp(-\gamma t) + \delta \, .$$

The estimation of the component parameters was carried out in a series of steps in which those covariates which had estimable and statistically significant ($p<0.05$) influences of the probability of death were identified for inclusion in the model. As the model for each of the 23 risk categories was estimated separately, different lists of covariates were used for the final core models.

This first step was followed by the estimation of the additional contribution of specific principal diagnoses in each risk category. In these analyses, the effects of the patient characteristics included in the core models were corrected for. Only those principal diagnoses were retained which were estimable and had more than 900 cases (more than 300 for codes identified by year). Similarly, after adjustment for the effects of both the variables in the core model and the principal diagnoses, correction terms were calculated to estimate the additional information about the probability of death associated with the categorization of the patients into the clinical groups used for the presentation of the data in the mortality tables (see below). These correction terms were negligible for the medical categories but substantial for the surgical categories.

Once the component parameters or regression coefficients α_i, γ_i, and δ_i have been estimated, the predicted probability of patient death at any specified time after admission, 1-S(t), may be calculated for all individuals. To obtain the predicted mortality rate up to a given time for a hospital, it is then only necessary to average over the predicted probabilities of death of its patients to that time.

The analytical categories are useful for grouping the patients into relatively risk-homogeneous strata for the regressions. However, to gain insights into patterns of practice at hospitals, the data are presented for patients grouped into clinically meaningful medical and surgical categories. The 17 clinical categories used in the mortality tables and defined in Table 1 were identified by the Institute of Medicine as being of particular medical and epidemiologic interest.

Estimation of the Standard Deviation for Predicted Mortality

The standard deviation of the predicted mortality rate is used to assess how statistically different the observed mortality rate is from the rate predicted by the national experience with like patients. The standard deviation depends, in fact, on the variance of the residual or the difference between the observed, P, and predicted, $\hat{\Theta}$, mortality rates.

The residual has four components V_1, V_2, V_3, and V_4 where V_1 is the variance of the estimate of the predicted probability of death. This computationally intensive term was negligible for nearly all cases, compared to other components of variance. Consequently, this term was not included in the present analysis.

V_2 is the binomial variance for n patients

$$V_2 = \frac{\hat{\Theta}\left(1 - \hat{\Theta}\right)}{n}.$$

V_3 is the variation among hospitals not explained by the mortality regression models containing the patient characteristics described above.

$$V_3 = \widehat{\mathrm{Var}(\Theta)} = \left(1 - \frac{1}{n}\right) \widehat{M_2(\Theta)}$$

where

$$\widehat{M_2(\Theta)} = \left\{ \begin{pmatrix} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics and} \\ \text{adjustment for hospital effects} \end{pmatrix} - \begin{pmatrix} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics,} \\ \text{but omitting the hospital specific effects} \end{pmatrix} \right\}^2 \left(\frac{1}{z_p^2} \right)$$

The quantity z_p corresponds to the statistical significance (p-value) of the hospital-specific effect.

V_4 is the variation not explained by the mortality regression models which each include, in addition, an indicator variable for the hospital:

$$V_4 = \left\{ \begin{pmatrix} \text{Observed mortality} \end{pmatrix} - \begin{pmatrix} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics, and} \\ \text{adjustment for the hospital specific effects} \end{pmatrix} \right\}^2 .$$

(The regression coefficients of the indicator variable for the hospital are a measure of the influence on the probability of patient death of factors not otherwise specified in the model. These factors include severity of illness not adequately reported on by the patient characteristics deduced from the claims data and the hospital's pattern of practice; i.e., performance.)

The standard deviation given in the mortality tables is just

$$SD = \sqrt{V_2 + V_3 + V_4}.$$

Standardized Mortality Ratio (SMR)

Another method of evaluating a hospital's performance—the Standardized Mortality Ratio (SMR)—is obtained by dividing the observed mortality rate by the predicted mortality rate. An SMR of one means the observed and predicted mortality are equal. A ratio greater than one means the observed mortality exceeds the predicted. A ratio less than one means the observed mortality is less than expected. The more extreme the ratio (significantly greater than one indicating unusually high mortality and significantly less than one indicating unusually low mortality), the greater the attention which should be paid to the results of this mortality report.

For each of the conditions and procedures, selected percentiles for the observed distribution of the SMR are displayed in Table 4. The selected percentiles provide benchmarks for comparison. For example, for a hospital

with 300 cases in the "All Causes" category, with observed mortality of 12.2 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 12.2/10.0 = 1.22.

Note that an SMR of one means the observed and predicted mortality are equal, while a ratio greater than one means the observed mortality exceeds the predicted, and a ratio less than one means the observed mortality is less than expected. There will be greater interest in the more extreme ratios, either greater than one — excessively high mortality — or less than one — extremely low mortality.

From Table 4 for FY 1990, we find that the ratio is just below the 75th percentile of 1.23. Hence, slightly under 75 percent of the hospitals have an SMR less than that found at this hospital.

However, for a hospital with 900 cases in the "All Causes" category, with observed mortality of 19.3 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 19.3/10.0 = 1.93.

Since the SMR of 1.93 is greater than the 97.5 percentile of 1.35 (Table 4 for 750 or more cases), there is cause for concern. To further assess this, we examine the displayed data in terms of the measure of uncertainty, the standard deviation.

Measures of Uncertainty

In principle, to use the standard normal approximations to determine prediction intervals, an adjustment must be applied for the skewness and kurtosis inherent in a mortality rate when the rate is considerably less than 50 percent and the number of cases is small. Table 5 presents the multiplicative factors, based on the binomial distribution, for the standard deviation needed to construct prediction intervals for the mortality rates at confidence levels of 75, 95 and 99 percent. Because of the approximations involved in the estimation of the skewness and kurtosis corrections, their precision decreases as the number of cases and the mortality rate decrease; i.e., as the value of the correction increases. In addition, because of simplifications and approximations in the estimation of the standard deviation, the precision of the multiplicative factors given in Table 5 exceeds the precision of the estimate of the standard deviation. Hence, the following rule-of-thumb represents an adequate approximation to the factors in Table 5 and an adequate guide to the **statistical meaningfulness** of the difference between the observed and the predicted mortality rates.

To illustrate the use of Table 5, consider a hospital with 75 cases and a predicted mortality of 13.0 percent with a standard deviation of 5.0 percent. Overall, for hospitals with patients with characteristics similar to those of this hospital, we would expect the actual or observed mortality rate to lie, 95 percent of the time, either between 13.0 percent and 22.9 percent if the actual is larger than the predicted, or between 3.3 percent and 13.0 percent if the actual is less than the predicted. That is because 22.9 percent = 13.0 percent + 1.98 x 5.0 percent, the factor 1.98 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Upper Bound," the row "75" for the number of cases, and, by interpolation, between the "10 percent" and the "20 percent" predicted mortality rate columns. Similarly, 3.3 percent = 13.0 percent - 1.94 x 5.0 percent, the factor -1.94 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Lower Bound" and the corresponding row and columns.

Therefore, in comparing the actual and predicted rates, more attention should be given to the hospital whose observed mortality rate lies beyond the bounds calculated for the 99 percent prediction interval than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 95 percent prediction interval. Likewise, more attention should be given to that hospital than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 75 percent prediction interval.

For the graphs, the observed mortality and an approximate 95 percent prediction interval are displayed. The prediction interval has bounds at the predicted mortality plus 2 times the standard deviation and at the predicted minus 2 times the standard deviation.

In the mortality rate tables, the observed and predicted mortality rates and the standard deviation as a measure for statistical importance of the difference are displayed for the overall and each of the conditions and procedures.

How To Obtain Medicare Hospital Information

The publication has been widely distributed to State health organizations and hospital and medical associations. The publication is available to the public for purchase in 55 volumes, with each volume being sold separately through the Government Printing Office (GPO). More detailed information about the purchase of this publication may be obtained by contacting:

Superintendent of Documents
Government Printing Office
Washington, D.C. 20402
Telephone: (202) 783-3238

As in prior years, the information appearing in the Medicare Hospital Information report is available in machine-readable/electronic format (tape and diskette). The Medicare Hospital Information public use file provides the published information as contained in the 55-volume hardcopy publication, except that the AHA's hospital characteristics are not on this file. Hospital characteristics from HCFA files (OSCAR) are provided instead. The files contain additional information which is useful for supplemental analyses: averages by hospital, MSA, and State for each of the variables used in the model, mortality rates for 15, 30, 60, 90 and 180 days, and cross-reference files which relate State, MSA, and ICD-9-CM codes used to a name. These data should allow analysts to assess an individual hospital's performance in comparison to all hospitals in the State or applicable MSA.

Also available to **hospitals** in machine-readable format is their patient-specific data that were used in the report. These data include the patient variables used in the analysis (e.g., the number and severity level of prior hospitalizations considered by the methodology, admission source and type, etc.) and the predicted probability of death at each time interval for each individual included in the study. With these data it is possible for hospitals to better understand their statistics. **Due to confidentiality considerations, requests for patient-specific data must be forwarded on hospital letterhead, must include the institution's Medicare provider number, and must be signed by the hospital administrator.**

For information about obtaining Medicare Hospital Information electronic media data, please contact HCFA's Bureau of Data Management and Strategy at:

Health Care Financing Administration
Bureau of Data Management and Strategy
Office of Statistics and Data Management
3-A-10 Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207
Telephone: (410) 597-5151

Table 1

DIAGNOSTIC AND PROCEDURE CATEGORIES

The following lists the ICD-9-CM diagnostic and procedure codes used to classify and group patients for presentation

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Heart Disorders/Procedures	
Acute Myocardial Infarction (AMI)	All of 410 (D) (on 10/1/89 exclude 410 with 5th digit of a 2)
Note: *For code 410 a 5th digit was added on October 1, 1989.*	
Congestive Heart Failure (CHF)	398.91, 402.01, 402.11, 402.91, 428.0, 428.1, 428.9 (all D)
Angioplasty (ANGPLSTY)	All of 36.0 (P) excluding 36.00, 36.03, 36.04, 36.09 (all P)
Note: *Code 36.0 had a 4th digit added on October 1, 1986. Code 36.0 got digits of 0, 1, 2, 3, and 9, and code 36.04 got some previously coded cases of 39.97. On October 1, 1987, code 36.01 was divided into 36.01 and 36.05, and some cases from 36.02 were put into 36.05.*	
Coronary Artery Bypass Graft (CABG)	All of 36.1(P) and not Angioplasty (see above)
Pacemaker Insertion, Initial (PACE)	37.73, 37.74, 37.75, 37.77 (after 10/1/87 use 37.70 through 37.73) (all P)
Note: *Code 37.70 was restructured on October 1, 1987. Previously the code contained both leads and devices. On October 1 these were separated and devices were coded as 37.80 through 37.83, and codes for the leads were changed into various 37.70 codes.*	

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Pulmonary Disorders	
Pneumonia/Influenza (PNU)	All of 480, all of 481, 482.2, 482.3, 482.9, 483, 485, 486, 487.0 (all D)
Chronic Obstructive Pulmonary (COPD)	All of 491, all of 492, all of 494, Disease all of 496; and 466.0, 518.82, 518.5, and 786.09 when there is a secondary diagnosis of any 496 (all D)

Note: *Code 518.8 got a 5th digit on October l, 1987. Some cases from 799.1 were put into codes 518.81 and 518.82.*

Cerebrovascular Disorders/Procedures	
Transient Cerebral Ischemia (TCI)	433.1, 433.3, 435 (D) and exclude those patients with an endarterectomy at the time of admission—38.12(P)
Stroke (STK)	431, 434 through 434.9, 436 (all D)
Carotid Endarterectomy (ENDART)	38.12 (P) with 433.1 (D); 433.3 (D) or 435(D) as a principal diagnosis
Musculoskeletal Disorders/Procedures	
Fracture of Neck of Femur (FXHIP)	All of 820 (D)
Hip Replacement/Revision (HIPREP)	81.5, 81.6 (exclude 81.69) (all P). On 10/1/89 code 81.51 (P) through 81.53 (P) with same diagnoses.
Open Reduction of Fractured Femur (OPRDUX)	79.35(P) on condition of 820 (D) as principal diagnosis

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Genitourinary Disorders/Procedures	
Prostatectomy (PROS)	60.2, 60.3 through 60.69 (all P)
Hysterectomy (HYS)	68.3 through 68.7 (P)
Gastrointestinal Disorders/Procedures	
Cholecystectomy (CHOLOTMY)	51.22 (P)
Sepsis	
Sepsis	003.1, 020.2, 022.3, 036.2, 036.3, 036.89, 036.9, 038.0, 038.1, 038.2, 038.3, 038.40, 038.41, 038.42, 038.43, 038.44, 038.49, 038.8, 038.9, 054.5

Table 2

COMORBIDITY CONDITIONS
(all are D codes)

COMORBIDITY	ICD-9-CM CODES
Cancer	141-160.9, 162-172.9, 174-208.91
Chronic cardiovascular disease	412-414.9, 426-429.1
Chronic liver disease	571-572.8
Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
Chronic diabetes	250.01, 250.1-250.91
Chronic pulmonary disease	491-493.91, 496
Cerebrovascular degeneration	290-290.9, 294-299.9

Table 3

EXPLANATORY VARIABLES FOR THE MORTALITY MODEL

Generally the same variables are used for all diagnostic categories.

Demographics

SXFM — An indicator variable: = 1 if Female, 0 otherwise

AGEFM = AGESP if SXFM = 1, 0 otherwise
AGEML = AGESP if SXFM = 0, 0 otherwise

where

$$AGESP = \text{sign}(W-65)\left(\left|\frac{W-65}{65}\right|\right)^{1.44}$$

and

$$W = \begin{cases} 23 \text{ if } AGE \leq 23 \\ AGE \text{ if } 23 < AGE < 100 \\ 100 \text{ if } 100 \leq AGE \end{cases}$$

Comorbidities		**ICD-9-CM Codes**

(Indicator variables = 1 if comorbidity present on current or prior admission with discharge within 6 months prior to current admission, 0 otherwise)

CCA	Cancer	141-160.9, 162-172.9, 174-208.91
CCV	Chronic cardiovascular disease	412-414.9, 426-429.1
CLV	Chronic liver disease	571-572.8
CRN	Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
CDI	Chronic diabetes	250.01, 250.1-250.91
COP	Chronic pulmonary disease	491-493.91, 496
CCE	Cerebrovascular degeneration	290-290.9, 294-299.9

Co Occurrence of Comorbidities

COP_CCV	1 if COP = 1 and CCV = 1, 0 otherwise
CCA_CCV	1 if CCA = 1 and CCV = 1, 0 otherwise
COP_CCA	1 if COP = 1 and CCA = 1, 0 otherwise
CCE_CCV	1 if CCE = 1 and CCV = 1, 0 otherwise
CRN_CCV	1 if CRN = 1 and CCV = 1, 0 otherwise

Admission Sources and Types

(Indicator variables = 1 if source or type present, 0 otherwise)

PREF	Patient referred by personal or HMO physician
TRSNF	Patient transferred from skilled nursing facility
ELCT	Patient admitted for elective procedure
EMRG	Patient admitted for emergency

Co-Occurrence of Admission Source and Type

PREF_ELEC = 1 if PREF = 1 and ELCT = 1, 0 otherwise

Previous Hospitalizations

P_RISK1	Number at 1st risk level with 3 or more set to 3
P_RISK2	Number at 2nd risk level with 3 or more set to 3
P_RISK3	Number at 3rd risk level with 3 or more set to 3
P_RISK4	Number at 4th risk level with 4 or more set to 4
P_RISK5	Number at 5th risk level with 3 or more set to 3
F(T)	Probability of death from previous admission if discharge within 182 days of current admission, 0 otherwise

Time Trend

FLAG89	1 if discharge in FY1989, 0 otherwise
FLAG90	1 if discharge in FY1990, 0 otherwise
INYEAR	Difference between current admission date and April 1 of fiscal year of discharge

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1990

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2645	0.45	0.88	1.04	1.23	1.72	0.56	0.90	1.03	1.17	1.54	0.61	0.90	1.02	1.15	1.46
OVERALL(>= 750 CASES)	2684	0.73	0.91	0.99	1.09	1.35	0.79	0.94	1.01	1.09	1.28	0.82	0.94	1.01	1.08	1.24
CONDITIONS																
AMI	1405	0.54	0.80	0.95	1.11	1.42	0.62	0.86	0.99	1.14	1.44	0.63	0.86	0.99	1.13	1.39
CHF	2335	0.43	0.79	0.98	1.17	1.64	0.60	0.85	0.99	1.13	1.49	0.66	0.89	1.00	1.13	1.41
PNEUMONIA/INFLUENZA	2428	0.41	0.78	0.97	1.18	1.68	0.53	0.84	1.00	1.17	1.55	0.57	0.86	1.01	1.16	1.50
COPD	435	0.00	0.63	0.97	1.34	2.06	0.30	0.78	1.02	1.26	1.74	0.40	0.82	1.01	1.24	1.69
TRANS. CEREBRAL ISCHEMIA	404	0.00	0.00	0.83	1.34	3.20	0.00	0.48	0.85	1.31	2.27	0.21	0.60	0.90	1.21	2.05
STROKE	1789	0.53	0.79	0.95	1.13	1.56	0.61	0.84	0.98	1.13	1.47	0.65	0.87	0.99	1.12	1.42
HIP FRACTURE	1199	0.21	0.67	0.93	1.27	2.10	0.40	0.76	0.94	1.19	1.80	0.47	0.78	0.97	1.16	1.64
SEPSIS	254	0.51	0.79	0.96	1.12	1.50	0.65	0.86	0.99	1.13	1.47	0.69	0.89	1.01	1.15	1.44
PROCEDURES																
ANGIOPLASTY	425	0.00	0.49	0.89	1.33	2.66	0.00	0.60	0.93	1.36	2.34	0.00	0.63	0.97	1.34	2.14
CABG	556	0.20	0.68	1.03	1.39	2.45	0.28	0.73	1.00	1.32	2.09	0.28	0.73	1.01	1.30	2.10
PACEMAKER	112	0.00	0.41	0.72	1.37	3.25	0.20	0.61	0.90	1.21	2.17	0.21	0.65	0.84	1.16	1.87
CAROTID ENDARTERECTOMY	73	0.00	0.00	0.85	1.33	2.90	0.00	0.14	0.74	1.28	2.43	0.00	0.42	0.86	1.38	2.86
HIP REPLACEMENT	763	0.00	0.53	0.94	1.44	2.77	0.19	0.67	0.96	1.31	2.12	0.26	0.71	0.94	1.26	1.91
REDUCT. OF HIP FRACTURE	276	0.00	0.56	0.86	1.22	2.05	0.31	0.68	0.92	1.19	1.76	0.38	0.77	0.96	1.12	1.58
PROSTATECTOMY	1576	0.00	0.00	0.73	1.57	3.56	0.00	0.49	0.91	1.40	2.63	0.00	0.57	0.92	1.29	2.21
CHOLECYSTECTOMY	714	0.00	0.49	0.95	1.54	2.68	0.00	0.62	0.93	1.37	2.22	0.22	0.67	0.98	1.27	1.93
HYSTERECTOMY	113	0.00	0.00	0.00	2.00	6.69	0.00	0.00	0.76	1.70	3.59	0.00	0.24	0.75	1.27	2.91

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1989

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2746	0.50	0.87	1.04	1.23	1.73	0.58	0.89	1.03	1.17	1.54	0.61	0.89	1.01	1.14	1.44
OVERALL(>= 750 CASES)	2669	0.71	0.90	1.00	1.09	1.35	0.79	0.94	1.01	1.08	1.28	0.82	0.95	1.01	1.07	1.24
CONDITIONS																
AMI	1412	0.53	0.81	0.96	1.12	1.47	0.59	0.86	1.01	1.15	1.47	0.63	0.87	1.00	1.14	1.43
CHF	2293	0.47	0.80	0.97	1.18	1.69	0.58	0.86	1.00	1.14	1.48	0.66	0.89	1.02	1.14	1.40
PNEUMONIA/INFLUENZA	2179	0.45	0.77	0.97	1.19	1.67	0.54	0.85	1.01	1.18	1.55	0.60	0.86	1.02	1.18	1.51
COPD	324	0.21	0.68	0.99	1.32	2.13	0.44	0.78	1.04	1.27	1.91	0.49	0.84	1.04	1.24	1.66
TRANS. CEREBRAL ISCHEMIA	420	0.00	0.00	0.79	1.41	3.26	0.00	0.46	0.88	1.33	2.36	0.18	0.60	0.92	1.25	1.97
STROKE	1728	0.53	0.80	0.95	1.12	1.56	0.62	0.85	0.97	1.11	1.46	0.67	0.88	0.99	1.13	1.40
HIP FRACTURE	1126	0.24	0.67	0.95	1.30	2.04	0.39	0.75	0.98	1.21	1.71	0.46	0.78	0.97	1.18	1.59
SEPSIS	174	0.52	0.79	0.94	1.10	1.52	0.63	0.88	1.02	1.15	1.46	0.68	0.93	1.05	1.16	1.43
PROCEDURES																
ANGIOPLASTY	370	0.00	0.46	0.84	1.35	2.55	0.00	0.55	0.88	1.33	2.52	0.00	0.61	0.94	1.32	2.44
CABG	501	0.21	0.65	1.00	1.47	2.57	0.23	0.69	1.00	1.33	2.29	0.32	0.74	1.01	1.33	2.21
PACEMAKER	91	0.00	0.52	0.74	1.12	2.31	0.00	0.56	0.83	1.15	2.14	0.20	0.68	0.81	1.16	1.87
CAROTID ENDARTERECTOMY	55	0.00	0.00	0.82	1.51	5.01	0.00	0.47	0.86	1.31	4.00	0.00	0.43	0.85	1.28	3.12
HIP REPLACEMENT	686	0.00	0.52	0.92	1.44	2.46	0.00	0.65	0.94	1.27	1.95	0.21	0.67	0.94	1.19	1.75
REDUCT. OF HIP FRACTURE	246	0.19	0.57	0.91	1.23	1.96	0.31	0.71	0.96	1.19	1.74	0.41	0.78	0.96	1.13	1.53
PROSTATECTOMY	1570	0.00	0.00	0.67	1.50	3.46	0.00	0.47	0.86	1.36	2.67	0.00	0.58	0.93	1.28	2.15
CHOLECYSTECTOMY	680	0.00	0.53	0.94	1.53	2.90	0.00	0.62	0.97	1.36	2.15	0.22	0.66	0.95	1.26	1.98
HYSTERECTOMY	101	0.00	0.00	0.00	1.80	5.44	0.00	0.00	0.78	1.60	4.21	0.00	0.00	0.91	1.38	2.99

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1988

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2838	0.46	0.89	1.05	1.23	1.75	0.54	0.90	1.03	1.16	1.57	0.59	0.90	1.02	1.14	1.45
OVERALL(>= 750 CASES)	2693	0.73	0.90	1.00	1.10	1.35	0.79	0.94	1.01	1.09	1.27	0.82	0.95	1.01	1.08	1.24
CONDITIONS																
AMI	1414	0.56	0.82	0.96	1.12	1.41	0.63	0.87	1.01	1.14	1.42	0.65	0.89	1.00	1.13	1.39
CHF	2246	0.45	0.79	0.97	1.18	1.61	0.60	0.86	1.00	1.14	1.43	0.68	0.90	1.02	1.13	1.37
PNEUMONIA/INFLUENZA	2069	0.44	0.79	0.97	1.17	1.68	0.57	0.85	1.01	1.17	1.59	0.61	0.87	1.01	1.16	1.53
COPD	310	0.21	0.67	0.92	1.30	2.17	0.39	0.79	0.98	1.20	1.81	0.51	0.82	0.99	1.19	1.59
TRANS. CEREBRAL ISCHEMIA	495	0.00	0.00	0.84	1.48	2.94	0.00	0.48	0.92	1.39	2.28	0.21	0.60	0.92	1.27	1.92
STROKE	1726	0.51	0.79	0.95	1.12	1.56	0.60	0.84	0.98	1.13	1.44	0.64	0.88	1.00	1.13	1.42
HIP FRACTURE	1119	0.24	0.65	0.96	1.27	2.07	0.40	0.78	0.98	1.21	1.77	0.47	0.80	0.98	1.17	1.64
SEPSIS	133	0.58	0.77	0.92	1.08	1.64	0.56	0.86	1.00	1.13	1.54	0.67	0.88	1.02	1.14	1.53
PROCEDURES																
ANGIOPLASTY	297	0.00	0.50	0.87	1.35	2.60	0.00	0.59	0.91	1.34	2.50	0.00	0.65	0.95	1.31	2.25
CABG	478	0.21	0.68	0.98	1.39	2.40	0.32	0.73	1.00	1.36	2.12	0.38	0.75	1.01	1.31	2.04
PACEMAKER	83	0.00	0.34	0.65	1.04	1.75	0.01	0.54	0.85	1.03	1.70	0.23	0.69	0.87	1.10	1.57
CAROTID ENDARTERECTOMY	69	0.00	0.00	0.60	1.23	3.30	0.00	0.33	0.62	1.09	2.50	0.00	0.44	0.68	1.16	1.87
HIP REPLACEMENT	670	0.00	0.49	0.95	1.40	2.65	0.00	0.66	1.01	1.31	2.15	0.24	0.70	0.96	1.24	1.87
REDUCT. OF HIP FRACTURE	259	0.00	0.61	0.91	1.26	2.16	0.38	0.74	0.96	1.21	1.94	0.44	0.77	0.96	1.16	1.79
PROSTATECTOMY	1619	0.00	0.00	0.78	1.53	3.69	0.00	0.54	0.92	1.39	2.57	0.00	0.61	0.93	1.30	2.21
CHOLECYSTECTOMY	642	0.00	0.50	0.96	1.44	3.04	0.00	0.61	0.96	1.36	2.26	0.25	0.66	0.96	1.27	2.01
HYSTERECTOMY	90	0.00	0.00	0.00	1.57	5.00	0.00	0.00	0.68	1.43	2.83	0.00	0.28	0.67	1.15	2.88

TABLE 5: MULTIPLICATIVE FACTORS FOR THE CALCULATION OF THE BOUNDS FOR PREDICTION INTERVALS

(n is the number of cases at your hospital and p is the predicted mortality rate)

	99% Prediction Interval					95% Prediction Interval					75% Prediction Interval				
	Factor for Upper Bound					Factor for Upper Bound					Factor for Upper Bound				
p n	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
25	2.95	2.73	2.68	2.63	2.59	2.15	2.04	2.01	1.99	1.97	1.17	1.16	1.16	1.15	1.15
50	2.76	2.65	2.63	2.60	2.58	2.05	2.00	1.99	1.97	1.96	1.16	1.15	1.15	1.15	1.15
75	2.70	2.63	2.61	2.59	2.58	2.02	1.99	1.98	1.97	1.96	1.16	1.15	1.15	1.15	1.15
100	2.67	2.61	2.60	2.59	2.58	2.01	1.98	1.97	1.97	1.96	1.16	1.15	1.15	1.15	1.15
150	2.64	2.60	2.59	2.59	2.58	1.99	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
200	2.62	2.60	2.59	2.58	2.58	1.98	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
300	2.61	2.59	2.58	2.58	2.58	1.98	1.97	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
400	2.60	2.59	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
500	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
750	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
1000	2.59	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
2000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
5000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15

	Factor for Lower Bound					Factor for Lower Bound					Factor for Lower Bound				
p n	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
25	-2.21	-2.42	-2.48	-2.52	-2.56	-1.77	-1.88	-1.91	-1.93	-1.95	-1.13	-1.14	-1.14	-1.15	-1.15
50	-2.39	-2.50	-2.53	-2.55	-2.57	-1.87	-1.92	-1.93	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15
75	-2.45	-2.52	-2.54	-2.56	-2.57	-1.90	-1.93	-1.94	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15
100	-2.48	-2.54	-2.55	-2.56	-2.57	-1.91	-1.94	-1.95	-1.95	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
150	-2.51	-2.55	-2.56	-2.57	-2.57	-1.93	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
200	-2.53	-2.56	-2.56	-2.57	-2.57	-1.94	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
300	-2.54	-2.56	-2.57	-2.57	-2.57	-1.94	-1.95	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
400	-2.55	-2.57	-2.57	-2.57	-2.57	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
500	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
750	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
1000	-2.57	-2.57	-2.57	-2.57	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
2000	-2.57	-2.57	-2.57	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
5000	-2.57	-2.58	-2.58	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15

Medicare Hospital Information

ALEXANDRIA HOSPITAL

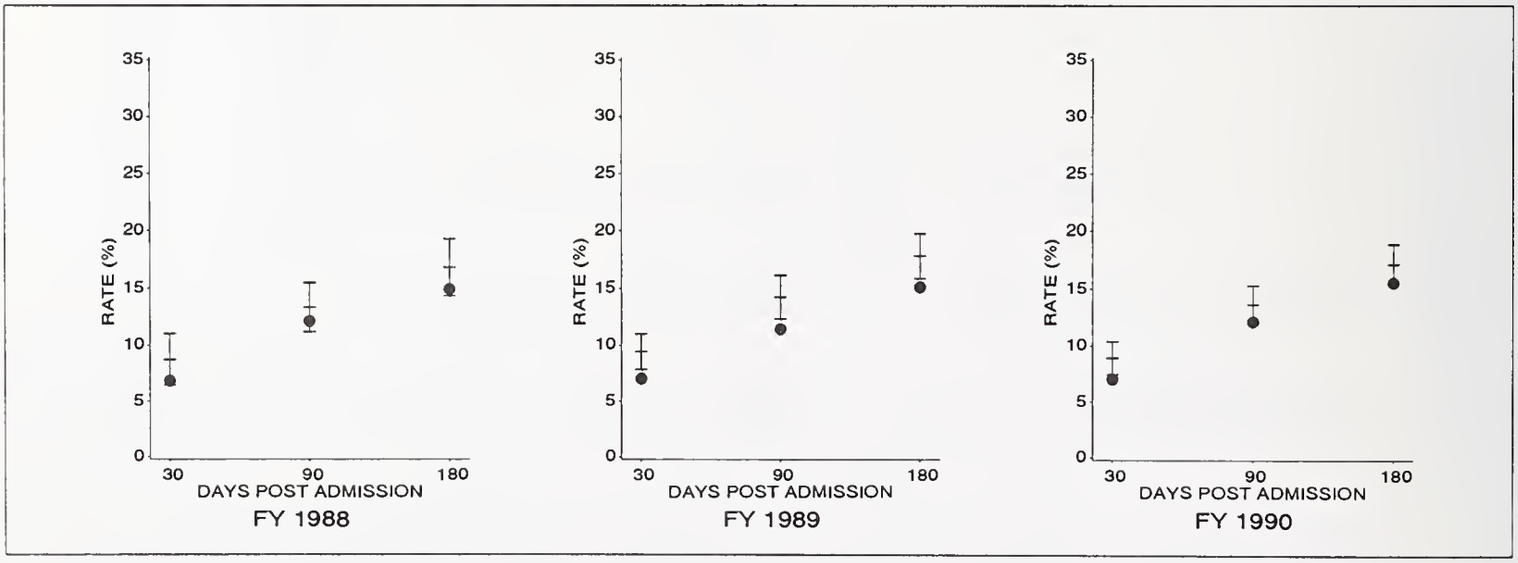
4320 SEMINARY RD
ALEXANDRIA, VA 22304
Medicare Provider Number: 490040

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2367	7.0	8.9	0.7	12.1	13.6	0.8	15.5	17.1	0.9
CONDITIONS:										
Acute Myocardial Infarction	44	22.7	27.6	-----	29.5	30.3	-----	31.8	32.9	-----
Congestive Heart Failure	108	9.3	15.3	5.4	14.8	24.0	6.8	21.3	30.5	7.1
Pneumonia/Influenza	77	9.1	15.2	6.1	11.7	20.7	6.7	20.8	24.4	6.7
Chronic Obstructive Pulmonary Disease	38	10.5	8.5	-----	13.2	14.9	-----	15.8	19.6	-----
Transient Cerebral Ischemia	35	2.9	1.7	-----	5.7	3.9	-----	5.7	6.5	-----
Stroke	73	13.7	21.3	6.4	23.3	27.3	5.7	26.0	30.9	6.1
Hip Fracture	54	3.7	7.7	6.1	9.3	13.8	7.6	14.8	18.1	7.7
Sepsis	45	26.7	28.4	-----	37.8	38.5	-----	44.4	43.9	-----
PROCEDURES:										
Angioplasty	26	7.7	4.0	-----	11.5	5.5	-----	11.5	6.8	-----
Coronary Artery Bypass Graft	47	2.1	5.1	-----	6.4	7.4	-----	6.4	8.5	-----
Initial Pacemaker Insertion	12	8.3	5.2	-----	8.3	9.3	-----	16.7	13.0	-----
Carotid Endarterectomy	2	0.0	1.8	-----	50.0	3.0	-----	50.0	4.0	-----
Hip Replacement/Reconstruction	33	0.0	2.9	-----	0.0	5.7	-----	3.0	7.8	-----
Open Reduction of Hip Fracture	24	8.3	9.5	-----	16.7	17.5	-----	25.0	23.0	-----
Prostatectomy	82	0.0	0.8	1.2	0.0	1.9	2.2	1.2	3.4	2.6
Cholecystectomy	20	5.0	3.0	-----	5.0	5.8	-----	5.0	7.8	-----
Hysterectomy	21	9.5	1.0	-----	9.5	2.1	-----	9.5	3.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ALEXANDRIA HOSPITAL
Medicare Provider Number: 490040

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.2 years
Proportion female	58.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.2 %
Transferred from skilled nursing facility	4.9 %
Admitted for elective procedure	10.1 %
Admitted for emergency	52.9 %

COMORBIDITIES:

Cancer	8.6 %
Chronic cardiovascular disease	29.7 %
Chronic liver disease	1.1 %
Chronic renal disease	4.9 %
Chronic pulmonary disease	10.5 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	7.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	67.9%
State	24.0%
Outside State	8.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	368
Occupancy Rate	(Not Available)
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.3114

STAFFING:

Total Number of Physicians	341
Percent of Physicians Board Certified Specialists	76.2 %
Medical Residents/Interns	0
Registered Nurses	464
Licensed Practical Nurses	24

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ALLEGHENY HOSPITAL

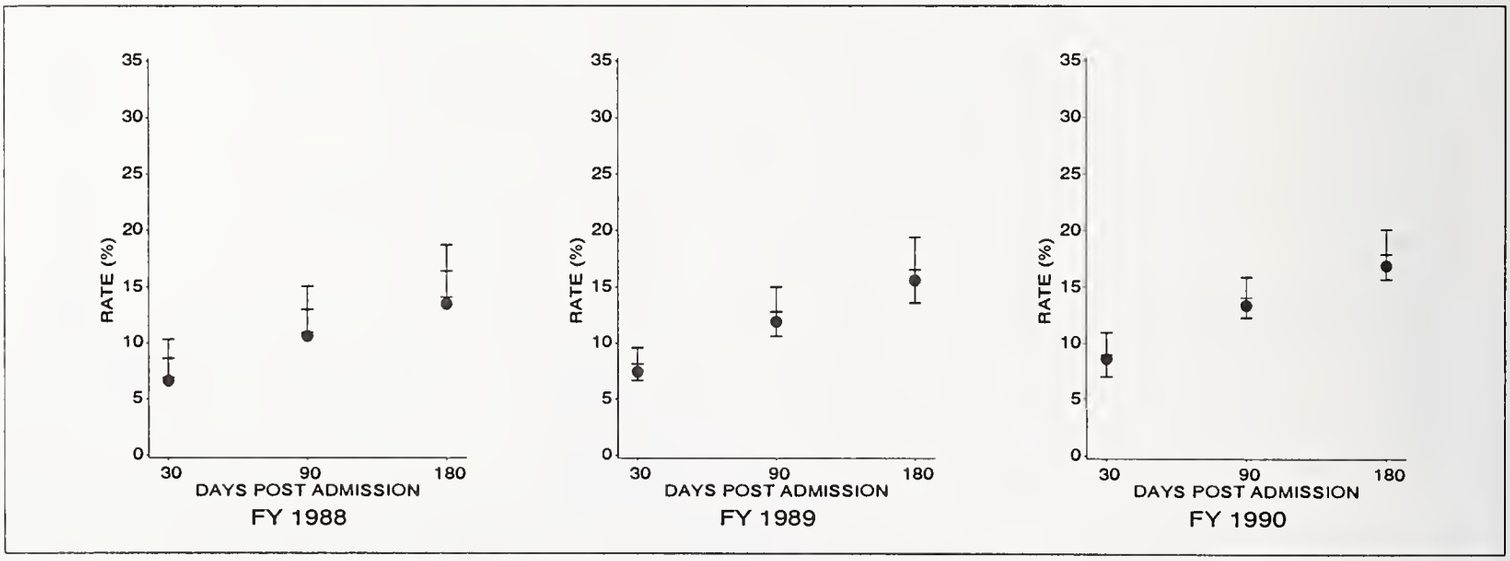
INTERSTATE 64
CLIFTON FORGE, VA 24422
Medicare Provider Number: 490126

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1672	8.6	9.0	1.0	13.4	14.1	0.9	16.9	17.9	1.1
CONDITIONS:										
Acute Myocardial Infarction	41	31.7	30.4	-----	41.5	34.5	-----	46.3	37.9	-----
Congestive Heart Failure	95	14.7	16.5	4.6	18.9	26.2	7.4	27.4	33.1	8.6
Pneumonia/Influenza	75	16.0	18.7	5.5	25.3	25.2	6.4	33.3	29.7	6.6
Chronic Obstructive Pulmonary Disease	15	0.0	5.5	-----	13.3	10.8	-----	20.0	15.6	-----
Transient Cerebral Ischemia	26	0.0	1.6	-----	0.0	3.8	-----	0.0	6.3	-----
Stroke	46	26.1	20.6	-----	32.6	28.7	-----	32.6	33.1	-----
Hip Fracture	39	2.6	5.1	-----	7.7	9.1	-----	10.3	11.9	-----
Sepsis	13	38.5	16.6	-----	46.2	21.8	-----	46.2	24.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	18	5.6	4.0	-----	5.6	8.0	-----	5.6	11.8	-----
Carotid Endarterectomy	1	0.0	2.0	-----	0.0	3.5	-----	0.0	5.1	-----
Hip Replacement/Reconstruction	33	3.0	1.5	-----	3.0	3.1	-----	3.0	4.4	-----
Open Reduction of Hip Fracture	19	0.0	6.4	-----	10.5	11.7	-----	15.8	15.3	-----
Prostatectomy	35	0.0	1.2	-----	0.0	2.9	-----	5.7	4.8	-----
Cholecystectomy	38	5.3	3.9	-----	5.3	6.5	-----	5.3	8.3	-----
Hysterectomy	8	0.0	0.1	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ALLEGHENY HOSPITAL
Medicare Provider Number: 490126

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	55.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	36.9 %
Admitted for emergency	61.9 %

COMORBIDITIES:

Cancer	8.0 %
Chronic cardiovascular disease	38.2 %
Chronic liver disease	1.5 %
Chronic renal disease	8.4 %
Chronic pulmonary disease	24.0 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	16.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	5.7%
State	68.1%
Outside State	26.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	204
Occupancy Rate	50.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	52.6 %
Case Mix Index (CMI)	1.1629

STAFFING:

Total Number of Physicians	39
Percent of Physicians Board Certified Specialists	87.2 %
Medical Residents/Interns	6
Registered Nurses	145
Licensed Practical Nurses	6

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ARLINGTON HOSPITAL

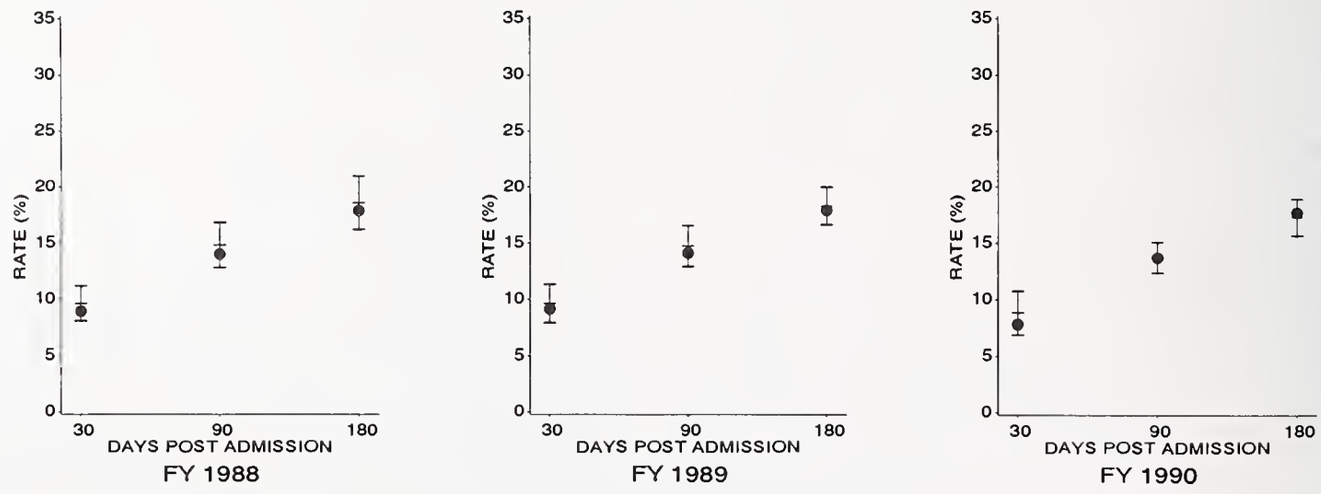
1701 N GEORGE MASON DR
ARLINGTON, VA 22205
Medicare Provider Number: 490050

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2518	7.8	8.8	1.0	13.7	13.7	0.7	17.7	17.3	0.8
CONDITIONS:										
Acute Myocardial Infarction	55	36.4	25.7	8.4	43.6	28.7	9.4	43.6	31.3	9.4
Congestive Heart Failure	105	15.2	15.4	3.5	24.8	24.2	5.0	34.3	30.8	5.6
Pneumonia/Influenza	69	14.5	15.6	5.5	21.7	21.2	5.5	23.2	25.0	5.7
Chronic Obstructive Pulmonary Disease	35	14.3	10.3	-----	25.7	17.7	-----	25.7	22.4	-----
Transient Cerebral Ischemia	33	0.0	1.8	-----	0.0	4.2	-----	6.1	6.9	-----
Stroke	100	13.0	21.2	5.9	20.0	28.3	6.1	27.0	32.2	6.0
Hip Fracture	64	1.6	6.5	5.5	9.4	11.7	6.8	10.9	15.3	6.5
Sepsis	26	19.2	28.3	-----	38.5	37.6	-----	42.3	43.2	-----
PROCEDURES:										
Angioplasty	31	6.5	2.4	-----	6.5	3.0	-----	6.5	3.9	-----
Coronary Artery Bypass Graft	27	0.0	2.9	-----	0.0	4.2	-----	0.0	4.9	-----
Initial Pacemaker Insertion	18	0.0	1.6	-----	0.0	3.6	-----	0.0	5.6	-----
Carotid Endarterectomy	6	0.0	1.1	-----	0.0	2.1	-----	16.7	3.1	-----
Hip Replacement/Reconstruction	62	0.0	3.3	3.8	0.0	6.1	6.2	0.0	8.1	7.6
Open Reduction of Hip Fracture	25	0.0	6.3	-----	16.0	12.0	-----	20.0	16.0	-----
Prostatectomy	40	2.5	0.7	-----	7.5	1.3	-----	7.5	2.2	-----
Cholecystectomy	35	0.0	2.4	-----	0.0	4.0	-----	0.0	5.1	-----
Hysterectomy	31	0.0	0.3	-----	0.0	0.8	-----	3.2	1.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ARLINGTON HOSPITAL
Medicare Provider Number: 490050

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	59.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.4 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	30.6 %
Admitted for emergency	51.7 %

COMORBIDITIES:

Cancer	8.9 %
Chronic cardiovascular disease	30.3 %
Chronic liver disease	1.4 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	10.0 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	55.0%
State	37.1%
Outside State	7.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	389
Occupancy Rate	71.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.9 %
Case Mix Index (CMI)	1.2515

STAFFING:

Total Number of Physicians	345
Percent of Physicians Board Certified Specialists	77.4 %
Medical Residents/Interns	0
Registered Nurses	293
Licensed Practical Nurses	30

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

AUGUSTA HOSPITAL CORPORATION

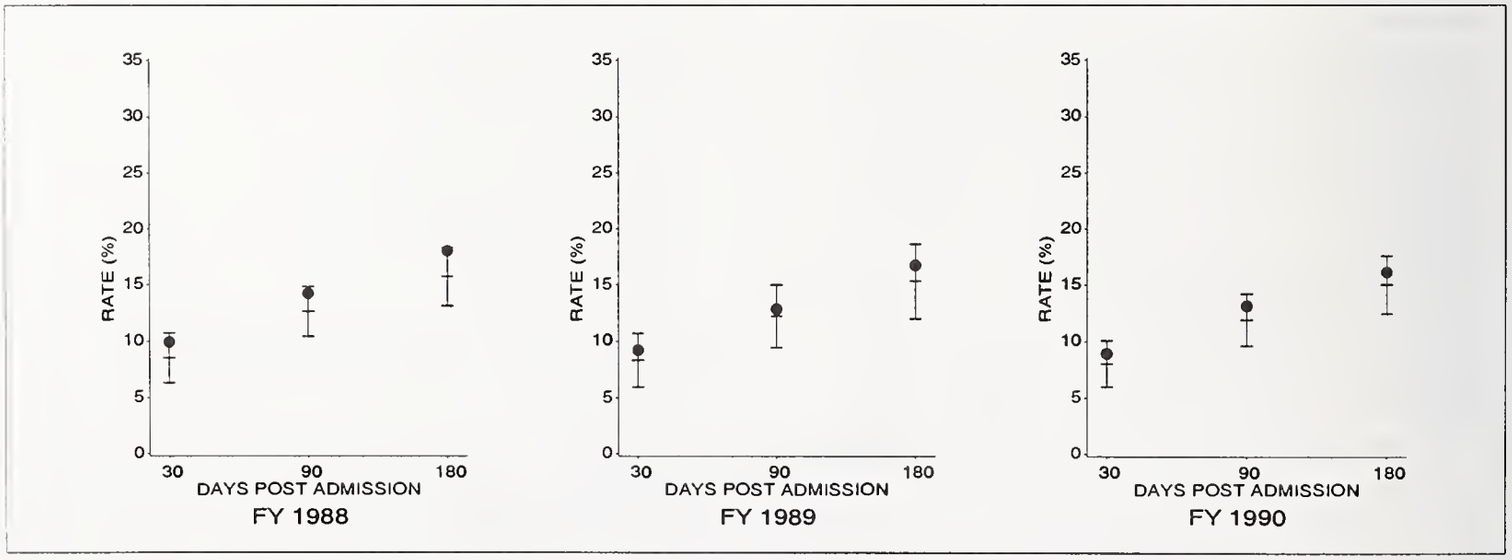
1410 N AUGUSTA STREET
STAUNTON, VA 24401
Medicare Provider Number: 490018

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1735	8.9	8.0	1.0	13.1	11.9	1.2	16.1	15.0	1.3
CONDITIONS:										
Acute Myocardial Infarction	90	26.7	23.8	6.1	28.9	26.6	6.5	33.3	29.5	7.4
Congestive Heart Failure	101	12.9	14.1	5.9	17.8	21.5	6.7	20.8	27.4	8.1
Pneumonia/Influenza	85	15.3	13.3	4.3	16.5	17.9	4.4	18.8	21.7	5.2
Chronic Obstructive Pulmonary Disease	25	12.0	6.4	-----	20.0	11.5	-----	20.0	16.2	-----
Transient Cerebral Ischemia	24	0.0	2.0	-----	0.0	4.6	-----	0.0	7.5	-----
Stroke	83	14.5	15.8	4.2	20.5	22.0	4.8	26.5	26.0	4.8
Hip Fracture	49	8.2	5.9	-----	10.2	10.0	-----	12.2	13.1	-----
Sepsis	18	33.3	18.5	-----	38.9	24.9	-----	44.4	29.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	1.2	-----	0.0	2.4	-----	0.0	3.9	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	42	2.4	2.3	-----	4.8	4.1	-----	7.1	5.5	-----
Open Reduction of Hip Fracture	14	21.4	5.8	-----	21.4	9.7	-----	21.4	13.2	-----
Prostatectomy	57	1.8	1.0	1.4	3.5	2.4	2.2	3.5	4.2	4.2
Cholecystectomy	51	0.0	1.6	2.7	2.0	3.4	3.7	3.9	5.0	4.4
Hysterectomy	15	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



AUGUSTA HOSPITAL CORPORATION

Medicare Provider Number: 490018

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	55.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	58.9 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	23.4 %
Admitted for emergency	55.7 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	29.3 %
Chronic liver disease	0.7 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	11.7 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	33.5%
State	63.7%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	131
Occupancy Rate	53.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	39.8 %
Case Mix Index (CMI)	1.1405

STAFFING:

Total Number of Physicians	50
Percent of Physicians Board Certified Specialists	80.0 %
Medical Residents/Interns	0
Registered Nurses	144
Licensed Practical Nurses	56

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

BATH COUNTY COMMUNITY HOSPITAL

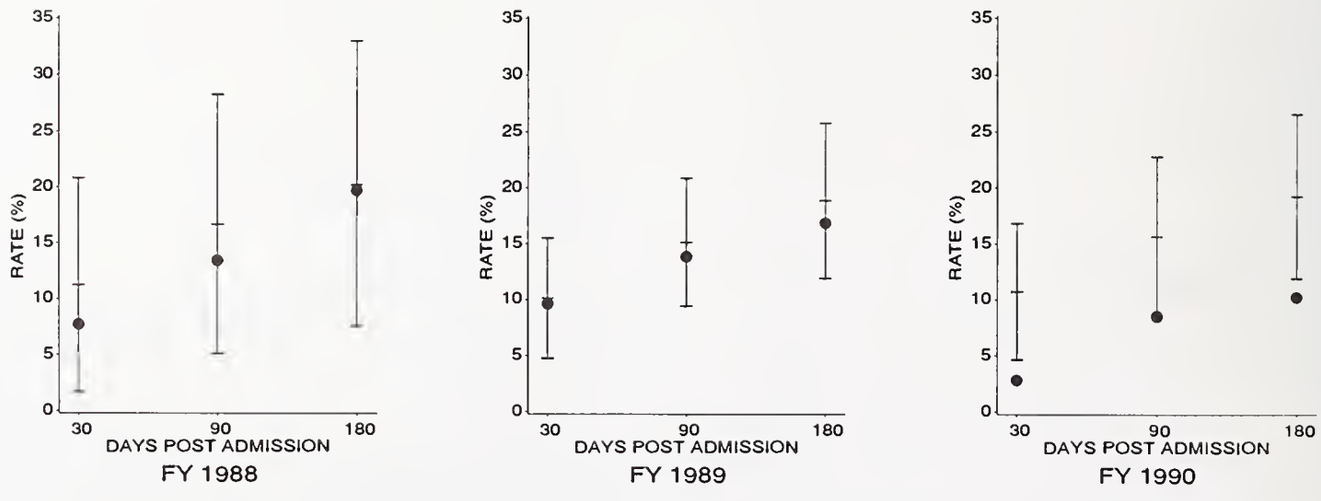
ROUTE 220, DRAWER Z
HOT SPRINGS, VA 24445
Medicare Provider Number: 490099

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	176	2.8	10.7	3.0	8.5	15.6	3.6	10.2	19.2	3.7
CONDITIONS:										
Acute Myocardial Infarction	6	33.3	29.4	-----	33.3	33.8	-----	33.3	37.0	-----
Congestive Heart Failure	8	0.0	11.2	-----	0.0	17.6	-----	0.0	22.9	-----
Pneumonia/Influenza	36	0.0	13.6	-----	8.3	18.8	-----	11.1	22.5	-----
Chronic Obstructive Pulmonary Disease	2	0.0	8.2	-----	0.0	16.4	-----	0.0	23.2	-----
Transient Cerebral Ischemia	6	0.0	0.9	-----	0.0	2.1	-----	0.0	3.5	-----
Stroke	8	12.5	24.6	-----	37.5	32.9	-----	37.5	37.4	-----
Hip Fracture	0									
Sepsis	1	0.0	4.9	-----	0.0	6.8	-----	0.0	9.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	1	0.0	1.2	-----	0.0	2.2	-----	0.0	2.9	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BATH COUNTY COMMUNITY HOSPITAL

Medicare Provider Number: 490099

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.4 years
Proportion female	61.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	11.9 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	36.9 %
Chronic liver disease	1.7 %
Chronic renal disease	1.7 %
Chronic pulmonary disease	14.2 %
Cerebrovascular degeneration	2.3 %
Diabetes mellitus	11.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.6%
State	14.5%
Outside State	3.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	25
Occupancy Rate	40.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	47.4 %
Case Mix Index (CMI)	0.9354

STAFFING:

Total Number of Physicians	6
Percent of Physicians Board Certified Specialists	66.7 %
Medical Residents/Interns	0
Registered Nurses	17
Licensed Practical Nurses	3

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

BEDFORD COUNTY MEMORIAL HOSPITAL

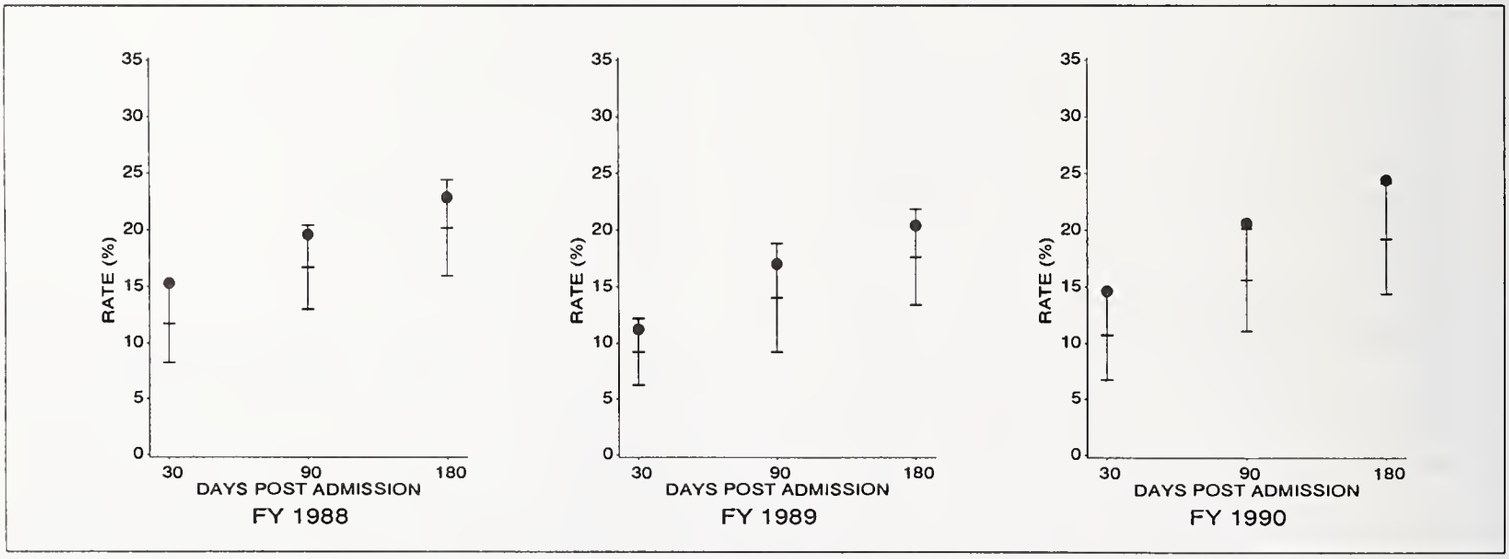
OAKWOOD ST
BEDFORD, VA 24523
Medicare Provider Number: 490088

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	500	14.6	10.7	2.0	20.6	15.6	2.3	24.4	19.2	2.4
CONDITIONS:										
Acute Myocardial Infarction	35	40.0	26.1	-----	45.7	29.2	-----	45.7	32.5	-----
Congestive Heart Failure	32	18.8	15.4	-----	25.0	24.3	-----	28.1	30.9	-----
Pneumonia/Influenza	24	20.8	17.7	-----	29.2	24.5	-----	37.5	28.8	-----
Chronic Obstructive Pulmonary Disease	9	0.0	3.9	-----	11.1	7.4	-----	11.1	10.8	-----
Transient Cerebral Ischemia	7	0.0	1.4	-----	0.0	3.1	-----	0.0	5.0	-----
Stroke	22	22.7	19.9	-----	40.9	26.5	-----	40.9	30.9	-----
Hip Fracture	17	0.0	5.6	-----	5.9	10.1	-----	5.9	13.3	-----
Sepsis	13	46.2	26.2	-----	46.2	31.9	-----	53.8	36.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	0.0	5.4	-----	0.0	10.8	-----	0.0	14.5	-----
Open Reduction of Hip Fracture	10	0.0	4.1	-----	0.0	7.7	-----	0.0	10.6	-----
Prostatectomy	7	0.0	0.6	-----	0.0	1.5	-----	0.0	2.9	-----
Cholecystectomy	9	0.0	0.9	-----	0.0	1.8	-----	0.0	2.5	-----
Hysterectomy	5	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BEDFORD COUNTY MEMORIAL HOSPITAL

Medicare Provider Number: 490088

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.3 years
Proportion female	51.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.0 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	5.0 %
Admitted for emergency	60.6 %

COMORBIDITIES:

Cancer	6.2 %
Chronic cardiovascular disease	34.4 %
Chronic liver disease	0.2 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	11.6 %
Cerebrovascular degeneration	7.4 %
Diabetes mellitus	12.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	36.8%
State	59.8%
Outside State	3.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	166
Occupancy Rate	78.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.6 %
Case Mix Index (CMI)	1.0863

STAFFING:

Total Number of Physicians	20
Percent of Physicians Board Certified Specialists	80.0 %
Medical Residents/Interns	0
Registered Nurses	31
Licensed Practical Nurses	18

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

BUCHANAN GENERAL HOSPITAL

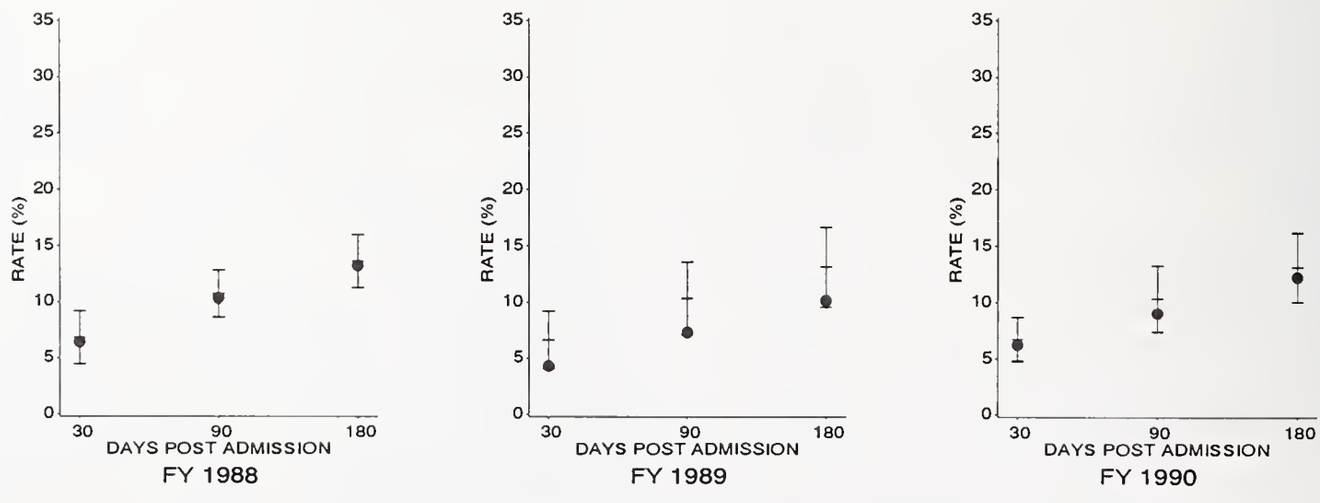
ROUTE 5, BOX 20
GRUNDY, VA 24614
Medicare Provider Number: 490127

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	790	6.2	6.7	1.0	9.0	10.3	1.5	12.2	13.1	1.5
CONDITIONS:										
Acute Myocardial Infarction	27	29.6	21.0	-----	37.0	23.4	-----	40.7	25.8	-----
Congestive Heart Failure	61	8.2	11.9	7.0	14.8	19.6	6.6	23.0	25.3	5.9
Pneumonia/Influenza	76	6.6	11.4	5.4	9.2	15.5	5.8	17.1	18.6	6.1
Chronic Obstructive Pulmonary Disease	55	1.8	3.7	2.9	1.8	7.4	4.4	3.6	10.9	5.6
Transient Cerebral Ischemia	22	0.0	1.7	-----	9.1	4.2	-----	13.6	7.1	-----
Stroke	14	21.4	22.9	-----	28.6	30.6	-----	35.7	35.1	-----
Hip Fracture	8	0.0	8.3	-----	12.5	14.6	-----	12.5	18.5	-----
Sepsis	1	100.0	25.8	-----	100.0	29.9	-----	100.0	32.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	4	0.0	4.9	-----	25.0	10.3	-----	25.0	15.3	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	19.4	-----	100.0	32.8	-----	100.0	40.4	-----
Open Reduction of Hip Fracture	4	0.0	3.1	-----	0.0	5.9	-----	0.0	8.3	-----
Prostatectomy	29	0.0	0.8	-----	0.0	1.7	-----	0.0	3.0	-----
Cholecystectomy	15	0.0	1.6	-----	6.7	2.9	-----	6.7	3.7	-----
Hysterectomy	3	0.0	0.0	-----	0.0	0.1	-----	0.0	0.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BUCHANAN GENERAL HOSPITAL
Medicare Provider Number: 490127

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	68.2 years
Proportion female	44.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	34.1 %
Admitted for emergency	50.9 %

COMORBIDITIES:

Cancer	2.4 %
Chronic cardiovascular disease	43.8 %
Chronic liver disease	1.1 %
Chronic renal disease	3.2 %
Chronic pulmonary disease	45.4 %
Cerebrovascular degeneration	2.0 %
Diabetes mellitus	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	69.7%
State	9.4%
Outside State	20.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	194
Occupancy Rate	37.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.9 %
Case Mix Index (CMI)	1.0602

STAFFING:

Total Number of Physicians	16
Percent of Physicians Board Certified Specialists	56.3 %
Medical Residents/Interns	0
Registered Nurses	82
Licensed Practical Nurses	50

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

CENTRAL VIRGINIA TRAINING CENTER

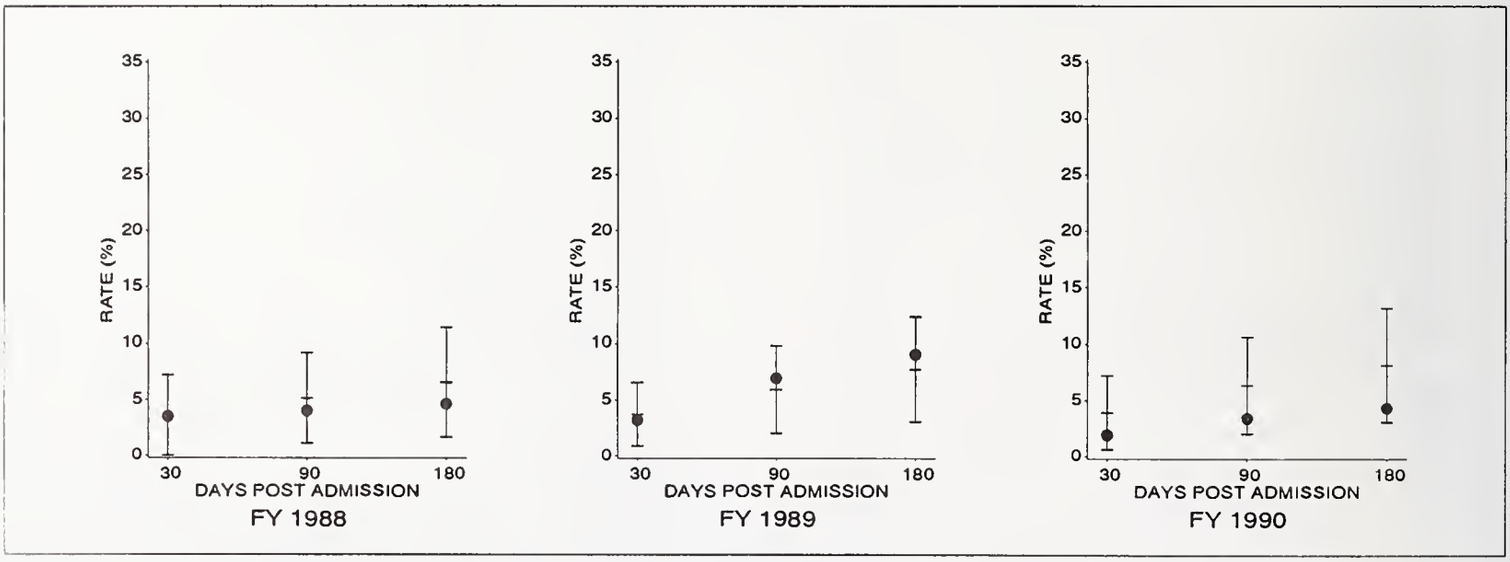
PO BOX 1098
LYNCHBURG, VA 24505
Medicare Provider Number: 490108

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	207	1.9	3.9	1.6	3.4	6.3	2.1	4.3	8.1	2.5
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	3	0.0	16.6	-----	0.0	25.8	-----	0.0	31.9	-----
Pneumonia/Influenza	37	2.7	6.4	-----	5.4	8.8	-----	5.4	10.5	-----
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CENTRAL VIRGINIA TRAINING CENTER

Medicare Provider Number: 490108

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	51.6 years
Proportion female	49.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	1.9 %
Transferred from skilled nursing facility	11.1 %
Admitted for elective procedure	96.6 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	1.4 %
Chronic cardiovascular disease	16.4 %
Chronic liver disease	1.0 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	5.3 %
Cerebrovascular degeneration	1.4 %
Diabetes mellitus	1.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	12.4%
State	87.0%
Outside State	0.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	1310
Occupancy Rate	99.0 %
Ownership/Control	State Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	0.8737

STAFFING:

Total Number of Physicians	12
Percent of Physicians Board Certified Specialists	41.7 %
Medical Residents/Interns	0
Registered Nurses	88
Licensed Practical Nurses	31

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

CHESAPEAKE GENERAL HOSPITAL

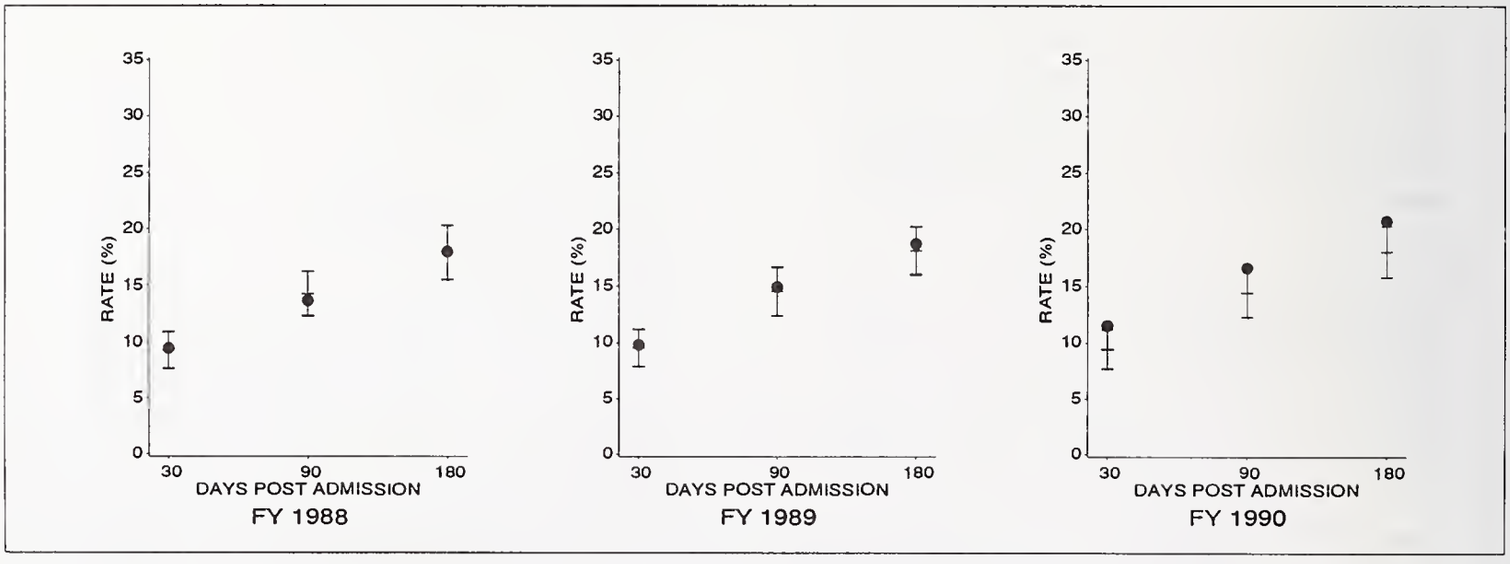
736 BATTLEFIELD BLVD N
CHESAPEAKE, VA 23320
Medicare Provider Number: 490120

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2100	11.5	9.4	0.9	16.6	14.4	1.1	20.7	18.0	1.1
CONDITIONS:										
Acute Myocardial Infarction	62	40.3	22.9	7.9	40.3	25.6	8.2	41.9	28.1	8.2
Congestive Heart Failure	84	19.0	13.7	7.2	26.2	22.3	6.0	32.1	28.9	5.7
Pneumonia/Influenza	80	12.5	13.1	4.0	16.2	18.3	5.3	21.2	21.7	5.2
Chronic Obstructive Pulmonary Disease	55	12.7	8.3	5.3	18.2	14.8	5.7	23.6	19.4	6.4
Transient Cerebral Ischemia	31	6.5	1.8	-----	6.5	3.9	-----	6.5	6.1	-----
Stroke	97	22.7	20.1	4.4	33.0	26.0	5.9	38.1	29.9	6.8
Hip Fracture	40	5.0	6.2	-----	20.0	11.2	-----	25.0	14.9	-----
Sepsis	39	25.6	25.5	-----	35.9	33.7	-----	48.7	38.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	0.0	2.9	-----	9.1	5.3	-----	9.1	7.5	-----
Carotid Endarterectomy	20	0.0	2.1	-----	0.0	3.9	-----	0.0	5.6	-----
Hip Replacement/Reconstruction	30	6.7	3.2	-----	13.3	6.0	-----	16.7	8.2	-----
Open Reduction of Hip Fracture	18	0.0	6.2	-----	16.7	11.4	-----	22.2	15.4	-----
Prostatectomy	42	0.0	1.0	-----	2.4	2.4	-----	4.8	4.0	-----
Cholecystectomy	35	2.9	3.7	-----	8.6	7.0	-----	11.4	9.3	-----
Hysterectomy	14	7.1	0.9	-----	7.1	1.8	-----	7.1	2.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CHESAPEAKE GENERAL HOSPITAL
Medicare Provider Number: 490120

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	58.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	15.2 %
Admitted for emergency	62.6 %

COMORBIDITIES:

Cancer	7.1 %
Chronic cardiovascular disease	30.6 %
Chronic liver disease	1.2 %
Chronic renal disease	4.2 %
Chronic pulmonary disease	17.1 %
Cerebrovascular degeneration	7.1 %
Diabetes mellitus	9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	61.7%
State	18.5%
Outside State	19.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	210
Occupancy Rate	77.0 %
Ownership/Control	District/Authority
Medicare Discharges	32.2 %
Case Mix Index (CMI)	1.3004

STAFFING:

Total Number of Physicians	215
Percent of Physicians Board Certified Specialists	75.3 %
Medical Residents/Interns	0
Registered Nurses	268
Licensed Practical Nurses	23

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

COMMUNITY HOSPITAL OF ROANOKE VALLEY

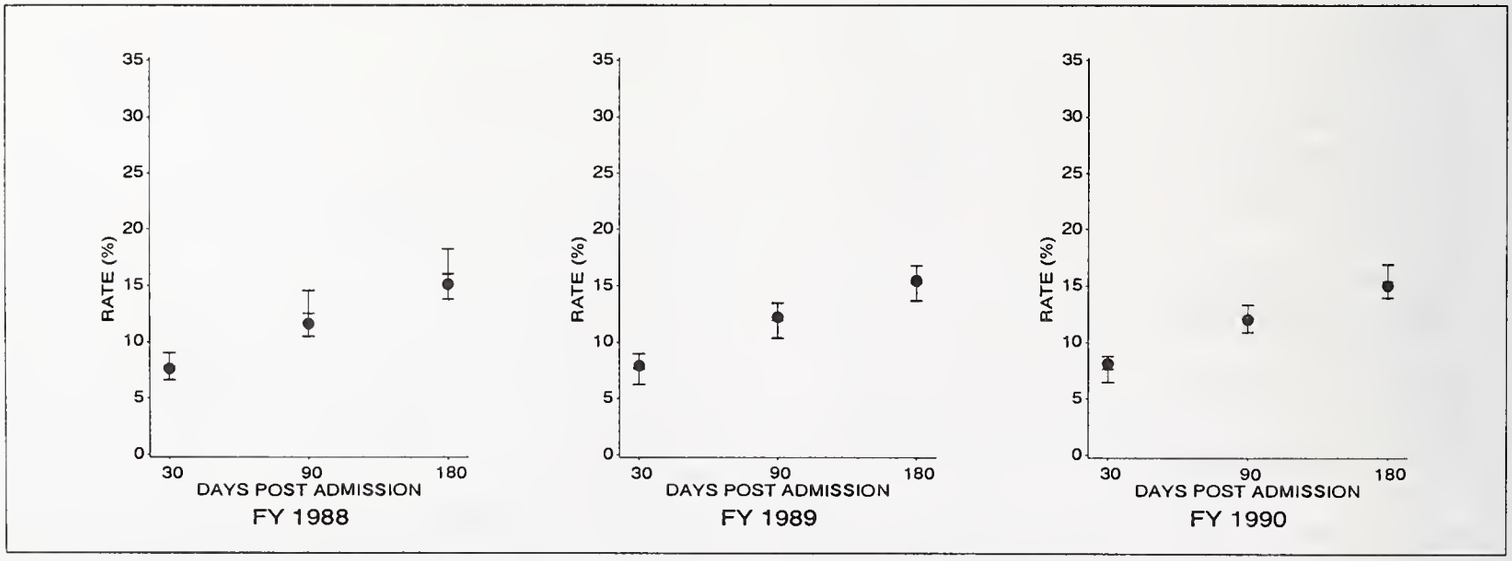
101 ELM ST SE
ROANOKE, VA 24029
Medicare Provider Number: 490100

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2917	8.1	7.6	0.6	12.0	12.1	0.6	15.0	15.4	0.7
CONDITIONS:										
Acute Myocardial Infarction	56	17.9	25.4	6.8	23.2	28.6	6.7	23.2	31.2	7.1
Congestive Heart Failure	138	14.5	14.5	3.0	24.6	23.2	4.1	30.4	29.5	5.5
Pneumonia/Influenza	124	18.5	14.1	4.7	21.8	19.5	6.9	28.2	23.2	6.6
Chronic Obstructive Pulmonary Disease	52	7.7	5.7	4.2	13.5	10.4	5.4	13.5	14.0	5.7
Transient Cerebral Ischemia	52	0.0	1.8	2.5	1.9	4.1	3.3	3.8	6.6	4.1
Stroke	103	16.5	17.0	4.2	21.4	23.2	4.5	27.2	26.9	4.5
Hip Fracture	86	4.7	5.4	2.6	10.5	9.8	3.3	11.6	12.9	3.8
Sepsis	21	28.6	30.0	-----	33.3	38.6	-----	38.1	44.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	14	7.1	3.1	-----	14.3	6.3	-----	14.3	9.5	-----
Carotid Endarterectomy	24	0.0	1.5	-----	0.0	2.8	-----	0.0	4.2	-----
Hip Replacement/Reconstruction	79	1.3	2.5	2.2	3.8	4.8	3.0	5.1	6.6	3.2
Open Reduction of Hip Fracture	48	8.3	5.4	-----	16.7	10.1	-----	16.7	13.5	-----
Prostatectomy	117	1.7	1.0	1.1	1.7	2.3	1.4	4.3	4.0	2.5
Cholecystectomy	54	1.9	2.4	2.3	1.9	4.5	3.7	3.7	6.2	4.8
Hysterectomy	35	2.9	0.9	-----	2.9	1.8	-----	8.6	2.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COMMUNITY HOSPITAL OF ROANOKE VALLEY

Medicare Provider Number: 490100

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	59.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	59.0 %
Transferred from skilled nursing facility	0.3 %
Admitted for elective procedure	18.3 %
Admitted for emergency	32.3 %

COMORBIDITIES:

Cancer	5.6 %
Chronic cardiovascular disease	31.3 %
Chronic liver disease	0.9 %
Chronic renal disease	4.1 %
Chronic pulmonary disease	16.6 %
Cerebrovascular degeneration	5.2 %
Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	52.5%
State	43.5%
Outside State	4.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	314
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	44.0 %
Case Mix Index (CMI)	1.2672

STAFFING:

Total Number of Physicians	176
Percent of Physicians Board Certified Specialists	89.2 %
Medical Residents/Interns	1
Registered Nurses	245
Licensed Practical Nurses	41

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

COMMUNITY MEMORIAL HOSPITAL

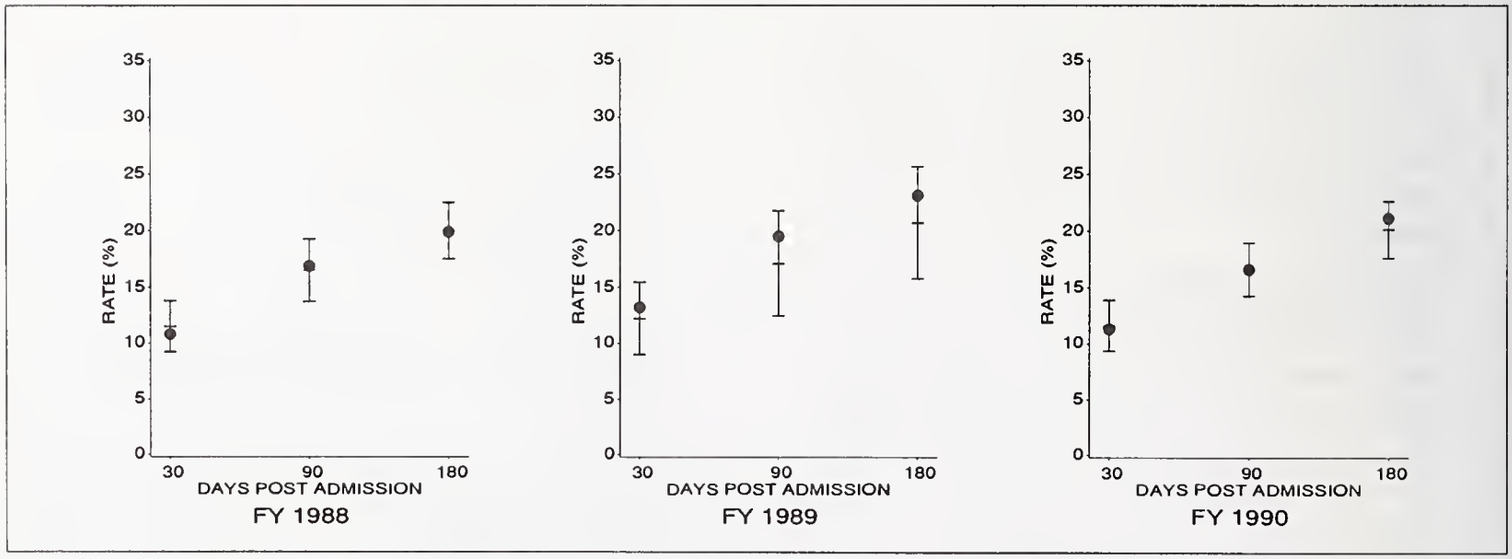
125 BUENA VISTA CIRCLE
SOUTH HILL, VA 23970
Medicare Provider Number: 490098

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1093	11.3	11.6	1.1	16.6	16.6	1.2	21.1	20.1	1.3
CONDITIONS:										
Acute Myocardial Infarction	71	22.5	25.2	6.7	26.8	27.7	6.4	32.4	30.6	7.6
Congestive Heart Failure	55	16.4	14.9	5.0	25.5	22.9	6.1	27.3	28.9	6.4
Pneumonia/Influenza	58	10.3	15.8	6.6	20.7	21.6	5.6	25.9	25.3	5.8
Chronic Obstructive Pulmonary Disease	11	18.2	9.7	-----	18.2	16.2	-----	18.2	20.9	-----
Transient Cerebral Ischemia	19	0.0	1.6	-----	0.0	3.5	-----	0.0	5.7	-----
Stroke	51	19.6	19.2	6.8	27.5	25.2	7.9	31.4	29.1	9.2
Hip Fracture	20	10.0	7.4	-----	25.0	12.4	-----	25.0	15.8	-----
Sepsis	24	25.0	27.4	-----	33.3	35.8	-----	45.8	40.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	9	0.0	3.3	-----	11.1	7.0	-----	11.1	10.3	-----
Carotid Endarterectomy	6	0.0	2.1	-----	0.0	3.6	-----	16.7	5.0	-----
Hip Replacement/Reconstruction	8	0.0	3.6	-----	12.5	6.6	-----	12.5	9.2	-----
Open Reduction of Hip Fracture	9	22.2	6.5	-----	44.4	11.2	-----	44.4	14.3	-----
Prostatectomy	42	0.0	1.8	-----	0.0	4.2	-----	4.8	7.0	-----
Cholecystectomy	18	0.0	2.4	-----	0.0	4.2	-----	0.0	5.5	-----
Hysterectomy	3	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COMMUNITY MEMORIAL HOSPITAL
Medicare Provider Number: 490098

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	54.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	31.7 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.1 %
Admitted for emergency	67.3 %

COMORBIDITIES:

Cancer	6.4 %
Chronic cardiovascular disease	48.0 %
Chronic liver disease	1.1 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	13.4 %
Cerebrovascular degeneration	3.2 %
Diabetes mellitus	9.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	49.2%
State	44.5%
Outside State	6.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	236
Occupancy Rate	92.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	52.7 %
Case Mix Index (CMI)	1.3141

STAFFING:

Total Number of Physicians	19
Percent of Physicians Board Certified Specialists	84.2 %
Medical Residents/Interns	0
Registered Nurses	62
Licensed Practical Nurses	61

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

CULPEPER MEMORIAL HOSPITAL INC

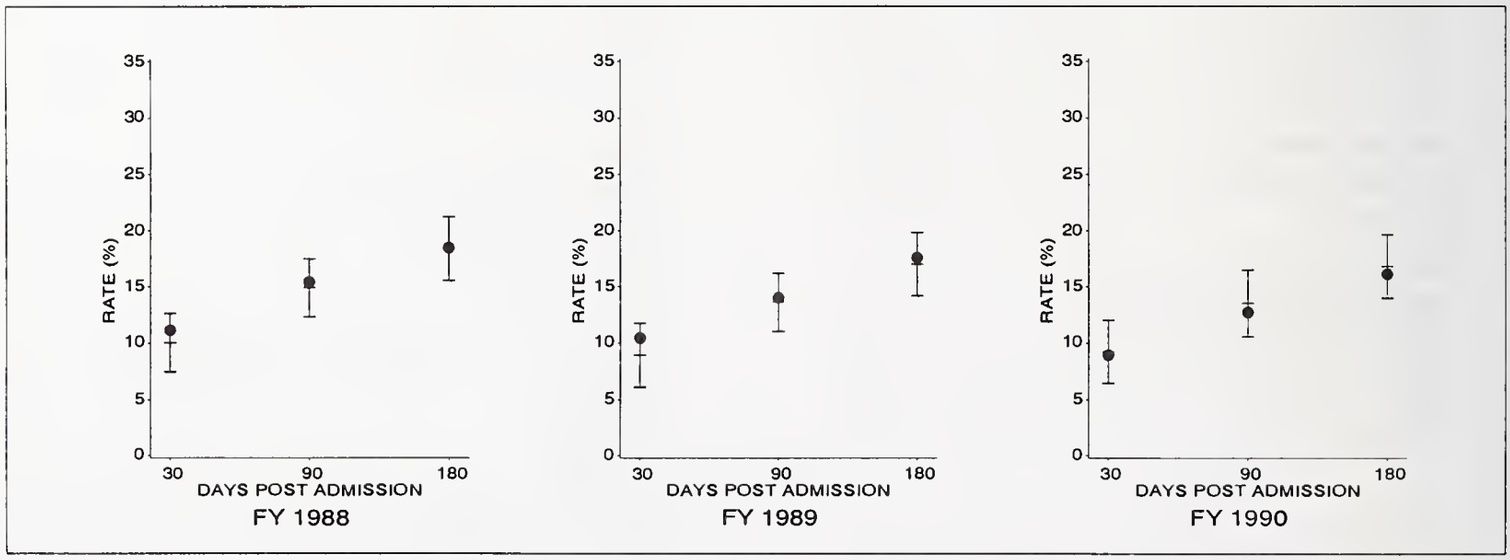
501 SUNSET LANE
CULPEPER, VA 22701
Medicare Provider Number: 490019

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	785	8.9	9.2	1.4	12.7	13.5	1.5	16.1	16.8	1.4
CONDITIONS:										
Acute Myocardial Infarction	38	26.3	25.4	-----	31.6	28.7	-----	34.2	31.7	-----
Congestive Heart Failure	30	3.3	16.4	-----	16.7	25.5	-----	26.7	31.8	-----
Pneumonia/Influenza	37	21.6	15.4	-----	24.3	21.1	-----	27.0	24.7	-----
Chronic Obstructive Pulmonary Disease	10	10.0	8.1	-----	10.0	14.1	-----	30.0	19.2	-----
Transient Cerebral Ischemia	20	0.0	1.9	-----	0.0	4.4	-----	0.0	7.4	-----
Stroke	30	40.0	20.3	-----	46.7	26.2	-----	50.0	30.1	-----
Hip Fracture	31	6.5	5.1	-----	6.5	9.1	-----	9.7	12.2	-----
Sepsis	8	25.0	38.4	-----	37.5	47.7	-----	62.5	52.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	2.1	-----	0.0	4.5	-----	0.0	6.9	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	26	7.7	2.6	-----	7.7	5.4	-----	7.7	8.0	-----
Open Reduction of Hip Fracture	16	6.3	5.6	-----	6.3	10.2	-----	12.5	13.6	-----
Prostatectomy	8	0.0	1.5	-----	0.0	3.4	-----	12.5	5.6	-----
Cholecystectomy	10	0.0	2.2	-----	0.0	3.6	-----	0.0	4.3	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CULPEPER MEMORIAL HOSPITAL INC

Medicare Provider Number: 490019

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.2 years
Proportion female	57.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	12.0 %
Admitted for emergency	58.0 %

COMORBIDITIES:

Cancer	5.4 %
Chronic cardiovascular disease	36.1 %
Chronic liver disease	0.5 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	12.1 %
Cerebrovascular degeneration	6.1 %
Diabetes mellitus	6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	61.0%
State	36.5%
Outside State	2.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	78
Occupancy Rate	52.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	40.9 %
Case Mix Index (CMI)	1.1198

STAFFING:

Total Number of Physicians	55
Percent of Physicians Board Certified Specialists	72.7 %
Medical Residents/Interns	0
Registered Nurses	76
Licensed Practical Nurses	29

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

DEPAUL MEDICAL CENTER

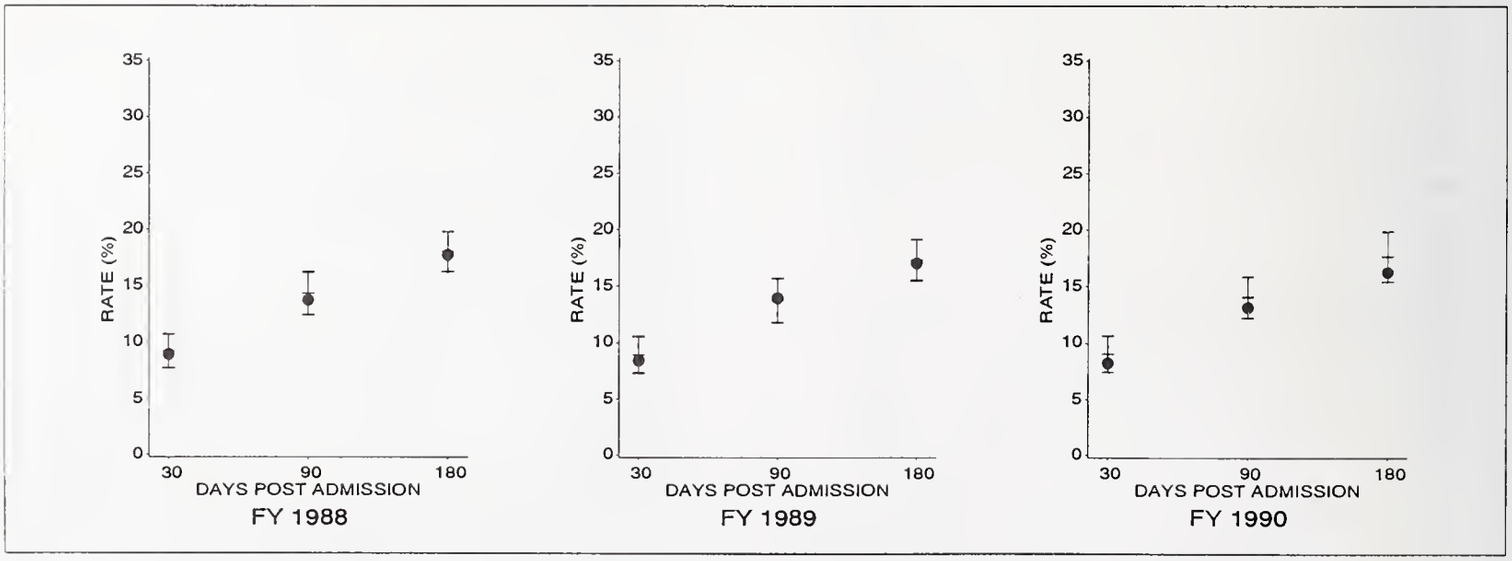
150 KINGSLEY AVE
NORFOLK, VA 23505
Medicare Provider Number: 490011

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2841	8.2	9.0	0.8	13.1	14.0	0.9	16.2	17.6	1.1
CONDITIONS:										
Acute Myocardial Infarction	77	23.4	26.9	7.0	28.6	29.5	7.1	32.5	32.0	6.3
Congestive Heart Failure	133	15.0	13.7	3.1	26.3	22.1	4.7	33.1	28.2	5.8
Pneumonia/Influenza	111	9.9	14.6	3.8	14.4	20.3	5.4	17.1	23.9	6.1
Chronic Obstructive Pulmonary Disease	44	13.6	9.7	-----	22.7	16.6	-----	27.3	21.8	-----
Transient Cerebral Ischemia	30	6.7	1.4	-----	6.7	3.2	-----	6.7	5.3	-----
Stroke	111	22.5	19.3	4.8	27.0	25.2	6.2	30.6	28.8	6.7
Hip Fracture	59	6.8	6.7	3.5	10.2	12.2	5.2	11.9	15.8	6.6
Sepsis	20	25.0	26.9	-----	25.0	37.4	-----	35.0	43.6	-----
PROCEDURES:										
Angioplasty	2	50.0	9.7	-----	50.0	10.4	-----	50.0	11.4	-----
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	14	0.0	5.3	-----	0.0	9.3	-----	0.0	12.0	-----
Carotid Endarterectomy	14	0.0	1.5	-----	0.0	2.7	-----	0.0	3.8	-----
Hip Replacement/Reconstruction	38	5.3	4.5	-----	10.5	8.5	-----	10.5	11.3	-----
Open Reduction of Hip Fracture	28	7.1	6.2	-----	7.1	11.7	-----	10.7	15.7	-----
Prostatectomy	100	2.0	1.2	1.4	2.0	2.7	1.9	6.0	4.5	2.5
Cholecystectomy	40	0.0	2.5	-----	2.5	4.9	-----	2.5	6.8	-----
Hysterectomy	41	0.0	1.0	-----	0.0	2.3	-----	0.0	3.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DEPAUL MEDICAL CENTER
Medicare Provider Number: 490011

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.9 years
Proportion female	59.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.1 %
Transferred from skilled nursing facility	0.3 %
Admitted for elective procedure	2.6 %
Admitted for emergency	62.1 %

COMORBIDITIES:

Cancer	9.7 %
Chronic cardiovascular disease	26.2 %
Chronic liver disease	1.2 %
Chronic renal disease	4.5 %
Chronic pulmonary disease	13.9 %
Cerebrovascular degeneration	4.8 %
Diabetes mellitus	8.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.2%
State	14.2%
Outside State	3.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	320
Occupancy Rate	72.0 %
Ownership/Control	Church
Medicare Discharges	35.2 %
Case Mix Index (CMI)	1.2321

STAFFING:

Total Number of Physicians	233
Percent of Physicians Board Certified Specialists	85.0 %
Medical Residents/Interns	0
Registered Nurses	312
Licensed Practical Nurses	56

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

DICKENSON COUNTY MEDICAL CENTER

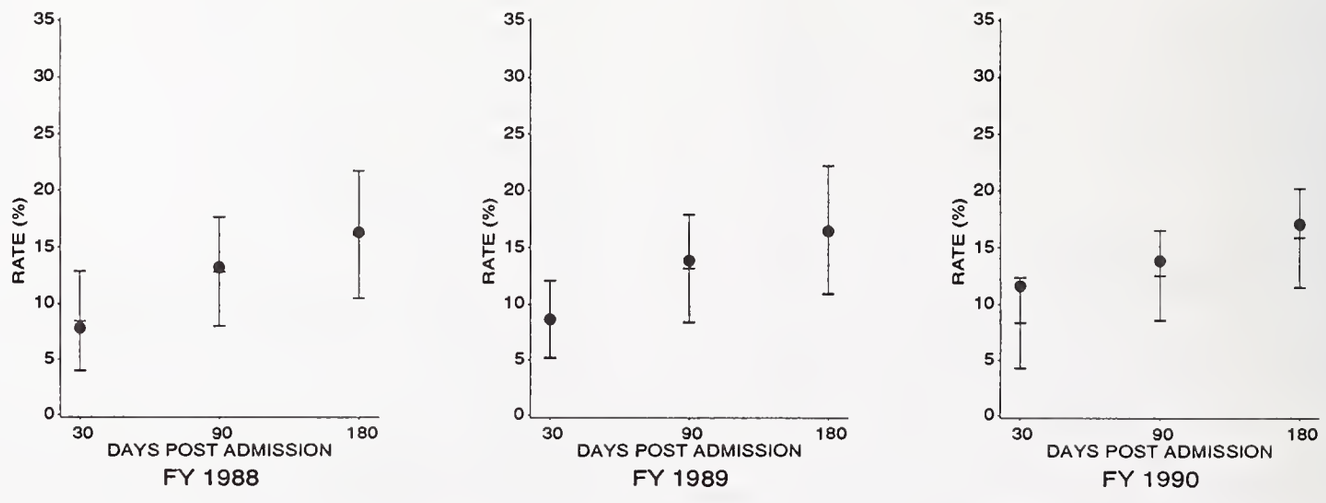
HOSPITAL DRIVE, BOX 1390
CLINTWOOD, VA 24228
Medicare Provider Number: 490131

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	311	11.6	8.3	2.0	13.8	12.5	2.0	17.0	15.8	2.2
CONDITIONS:										
Acute Myocardial Infarction	11	54.5	23.8	-----	54.5	28.2	-----	63.6	31.8	-----
Congestive Heart Failure	8	37.5	18.2	-----	50.0	27.7	-----	50.0	33.0	-----
Pneumonia/Influenza	22	13.6	13.6	-----	18.2	19.3	-----	22.7	23.1	-----
Chronic Obstructive Pulmonary Disease	15	0.0	5.7	-----	0.0	10.9	-----	13.3	15.6	-----
Transient Cerebral Ischemia	5	0.0	1.6	-----	0.0	4.0	-----	0.0	6.8	-----
Stroke	3	33.3	32.2	-----	66.7	36.5	-----	66.7	39.2	-----
Hip Fracture	0									
Sepsis	3	66.7	45.0	-----	66.7	55.6	-----	66.7	61.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	1	0.0	1.2	-----	0.0	2.9	-----	100.0	5.2	-----
Cholecystectomy	5	0.0	2.7	-----	0.0	5.0	-----	0.0	6.6	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DICKENSON COUNTY MEDICAL CENTER

Medicare Provider Number: 490131

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	70.3 years
Proportion female	56.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	16.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	80.7 %

COMORBIDITIES:

Cancer	5.1 %
Chronic cardiovascular disease	29.6 %
Chronic liver disease	0.6 %
Chronic renal disease	0.6 %
Chronic pulmonary disease	26.0 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	9.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.0%
State	12.7%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	50
Occupancy Rate	36.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	39.7 %
Case Mix Index (CMI)	0.9150

STAFFING:

Total Number of Physicians	9
Percent of Physicians Board Certified Specialists	55.6 %
Medical Residents/Interns	0
Registered Nurses	25
Licensed Practical Nurses	18

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

EASTERN STATE HOSPITAL

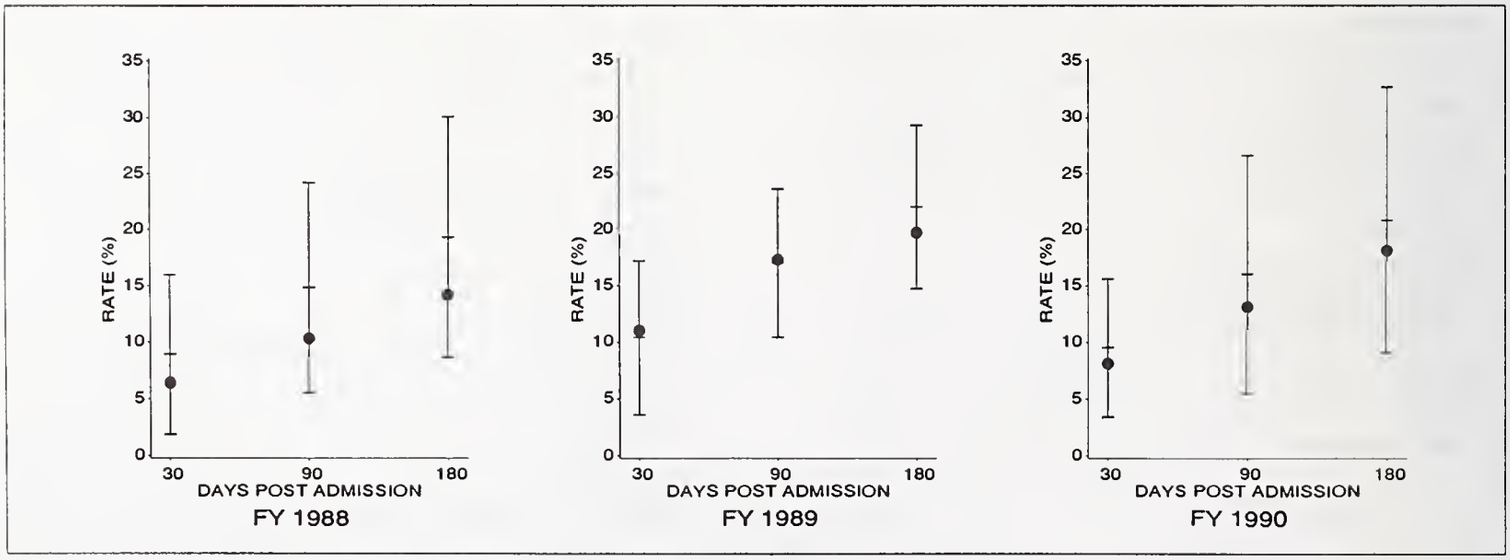
DRAWER A
WILLIAMSBURG, VA 23185
Medicare Provider Number: 490109

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	160	8.1	9.5	3.1	13.1	16.0	5.3	18.1	20.8	5.9
CONDITIONS:										
Acute Myocardial Infarction	1	0.0	27.6	-----	0.0	31.7	-----	0.0	37.2	-----
Congestive Heart Failure	5	0.0	17.5	-----	0.0	30.8	-----	0.0	39.6	-----
Pneumonia/Influenza	36	19.4	17.8	-----	22.2	26.8	-----	30.6	32.3	-----
Chronic Obstructive Pulmonary Disease	4	0.0	6.5	-----	0.0	11.2	-----	0.0	15.4	-----
Transient Cerebral Ischemia	0									
Stroke	2	50.0	14.7	-----	50.0	19.0	-----	100.0	22.6	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



EASTERN STATE HOSPITAL
Medicare Provider Number: 490109

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	69.7 years
Proportion female	41.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	0.0 %
Transferred from skilled nursing facility	7.5 %
Admitted for elective procedure	0.6 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	2.5 %
Chronic cardiovascular disease	8.1 %
Chronic liver disease	0.6 %
Chronic renal disease	5.0 %
Chronic pulmonary disease	5.6 %
Cerebrovascular degeneration	82.5 %
Diabetes mellitus	0.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	49.1%
State	49.7%
Outside State	1.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	1065
Occupancy Rate	81.0 %
Ownership/Control	State Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	0.8314

STAFFING:

Total Number of Physicians	27
Percent of Physicians Board Certified Specialists	48.1 %
Medical Residents/Interns	0
Registered Nurses	127
Licensed Practical Nurses	145

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

FAIR OAKS HOSPITAL

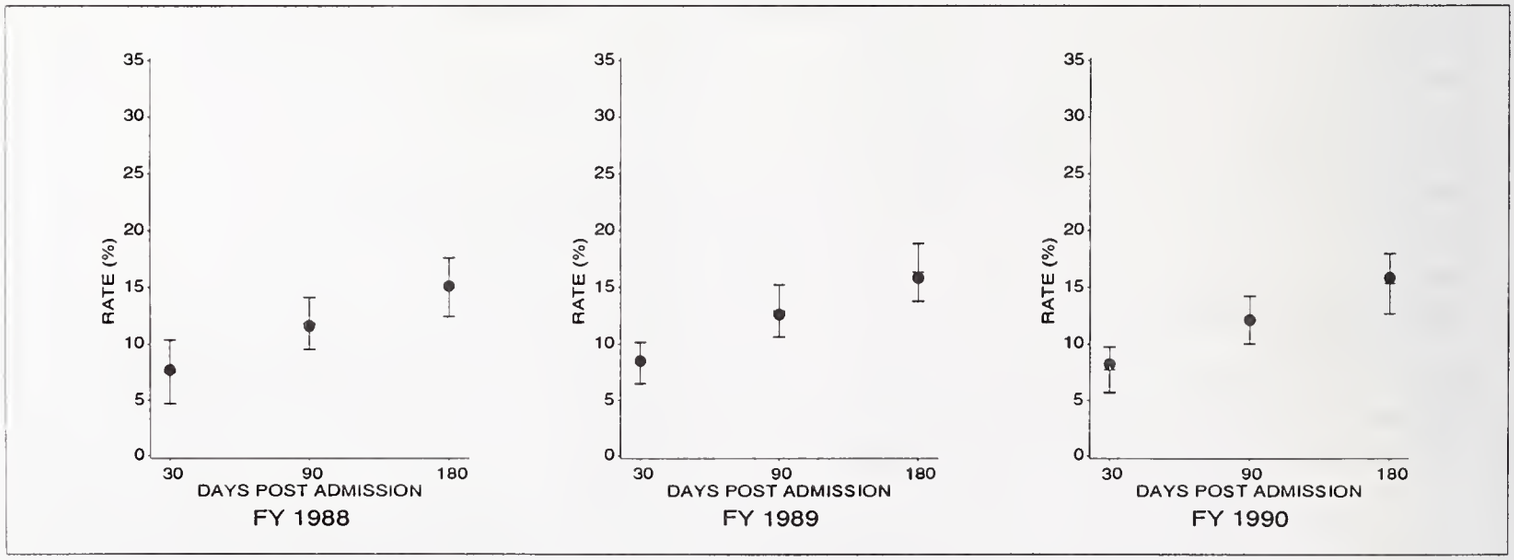
3600 JOSEPH DIEWICK DR
FAIRFAX, VA 22033
Medicare Provider Number: 490101

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	953	8.2	7.7	1.0	12.1	12.1	1.1	15.8	15.3	1.3
CONDITIONS:										
Acute Myocardial Infarction	29	31.0	25.5	-----	31.0	28.2	-----	31.0	30.5	-----
Congestive Heart Failure	50	10.0	12.9	-----	12.0	20.5	-----	26.0	26.4	-----
Pneumonia/Influenza	38	13.2	12.9	-----	18.4	17.7	-----	21.1	20.8	-----
Chronic Obstructive Pulmonary Disease	21	9.5	7.3	-----	9.5	12.3	-----	14.3	16.2	-----
Transient Cerebral Ischemia	23	0.0	1.9	-----	0.0	4.2	-----	0.0	6.8	-----
Stroke	35	8.6	16.9	-----	8.6	22.7	-----	11.4	26.1	-----
Hip Fracture	30	3.3	6.3	-----	16.7	11.6	-----	20.0	15.0	-----
Sepsis	2	100.0	30.2	-----	100.0	47.2	-----	100.0	54.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	3.5	-----	0.0	6.6	-----	0.0	9.6	-----
Carotid Endarterectomy	2	0.0	1.1	-----	0.0	2.3	-----	0.0	3.8	-----
Hip Replacement/Reconstruction	21	4.8	4.6	-----	14.3	9.0	-----	19.0	12.2	-----
Open Reduction of Hip Fracture	18	0.0	4.7	-----	11.1	9.3	-----	11.1	12.6	-----
Prostatectomy	24	0.0	1.1	-----	0.0	2.7	-----	0.0	4.7	-----
Cholecystectomy	30	0.0	2.8	-----	0.0	5.3	-----	0.0	7.0	-----
Hysterectomy	1	0.0	0.3	-----	0.0	0.8	-----	0.0	1.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



FAIR OAKS HOSPITAL
Medicare Provider Number: 490101

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.8 years
Proportion female	60.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	41.9 %
Transferred from skilled nursing facility	5.0 %
Admitted for elective procedure	14.5 %
Admitted for emergency	50.1 %

COMORBIDITIES:

Cancer	5.9 %
Chronic cardiovascular disease	27.7 %
Chronic liver disease	1.5 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	13.5 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	5.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	25.8%
State	62.7%
Outside State	11.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	138
Occupancy Rate	68.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	18.3 %
Case Mix Index (CMI)	1.0861

STAFFING:

Total Number of Physicians	375
Percent of Physicians Board Certified Specialists	76.0 %
Medical Residents/Interns	0
Registered Nurses	211
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

FAIRFAX HOSPITAL

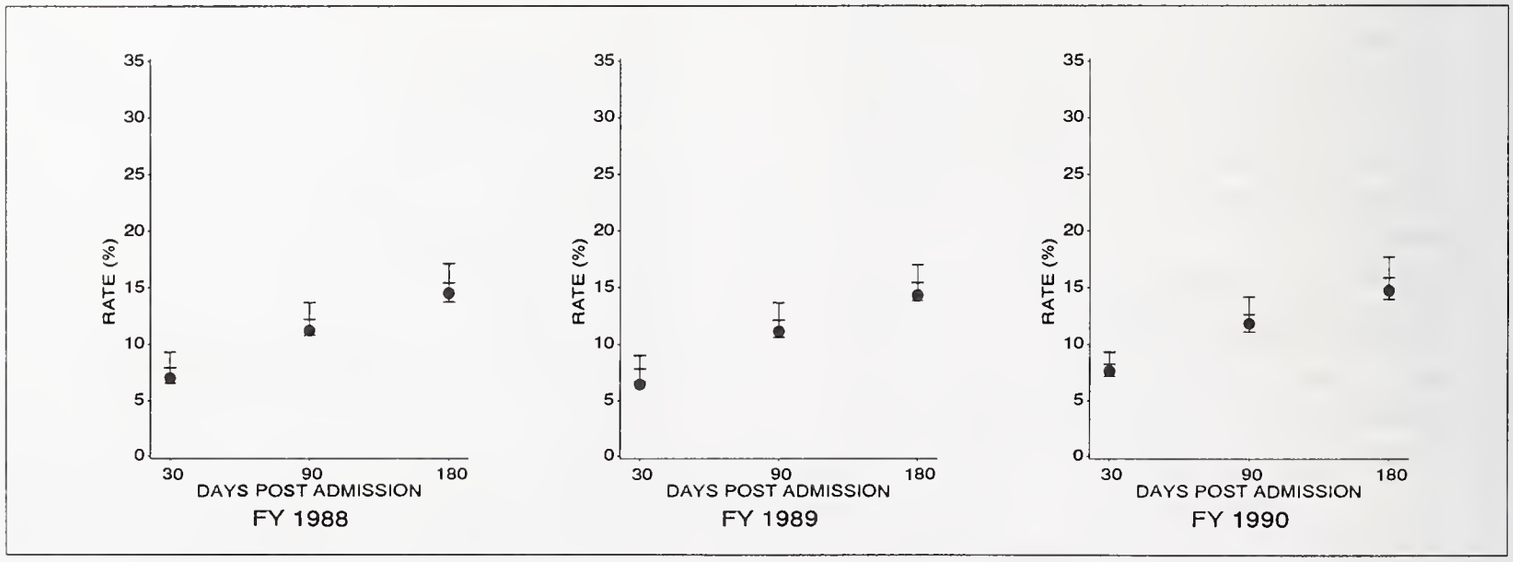
3300 GALLOWS RD
FALLS CHURCH, VA 22046
Medicare Provider Number: 490063

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4321	7.6	8.2	0.5	11.8	12.6	0.8	14.7	15.8	0.9
CONDITIONS:										
Acute Myocardial Infarction	108	25.0	23.7	4.5	27.8	26.2	4.6	29.6	28.6	4.5
Congestive Heart Failure	147	9.5	15.1	3.5	19.0	23.6	4.4	26.5	29.6	3.9
Pneumonia/Influenza	123	13.8	16.5	4.2	26.0	22.6	4.5	28.5	26.6	4.5
Chronic Obstructive Pulmonary Disease	69	8.7	8.4	3.4	15.9	14.4	6.6	31.9	18.8	6.3
Transient Cerebral Ischemia	59	1.7	1.5	1.7	1.7	3.4	2.6	1.7	5.6	3.9
Stroke	182	14.3	18.8	4.8	20.3	25.3	5.5	24.2	28.8	6.1
Hip Fracture	113	4.4	6.0	2.3	6.2	10.7	3.7	8.8	14.1	4.4
Sepsis	41	22.0	25.7	-----	41.5	33.4	-----	46.3	38.0	-----
PROCEDURES:										
Angioplasty	88	1.1	3.4	2.5	1.1	4.4	2.9	2.3	5.3	3.4
Coronary Artery Bypass Graft	192	6.3	5.3	2.1	8.3	7.5	2.0	8.9	8.6	2.1
Initial Pacemaker Insertion	36	0.0	2.0	-----	2.8	4.3	-----	2.8	6.6	-----
Carotid Endarterectomy	24	0.0	1.1	-----	0.0	2.0	-----	0.0	3.0	-----
Hip Replacement/Reconstruction	68	2.9	3.4	2.6	5.9	6.3	3.0	8.8	8.5	3.6
Open Reduction of Hip Fracture	48	2.1	5.7	-----	2.1	10.7	-----	4.2	14.2	-----
Prostatectomy	75	0.0	0.7	1.2	1.3	1.7	1.6	1.3	2.9	2.5
Cholecystectomy	70	4.3	2.8	2.5	8.6	5.2	4.0	10.0	6.9	4.0
Hysterectomy	50	0.0	0.6	-----	0.0	1.4	-----	0.0	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



FAIRFAX HOSPITAL
Medicare Provider Number: 490063

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.3 years
Proportion female	54.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.2 %
Transferred from skilled nursing facility	0.5 %
Admitted for elective procedure	26.2 %
Admitted for emergency	67.8 %

COMORBIDITIES:

Cancer	9.1 %
Chronic cardiovascular disease	31.7 %
Chronic liver disease	1.2 %
Chronic renal disease	3.2 %
Chronic pulmonary disease	10.0 %
Cerebrovascular degeneration	3.2 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	10.1%
State	76.9%
Outside State	13.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	696
Occupancy Rate	84.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	17.3 %
Case Mix Index (CMI)	1.5090

STAFFING:

Total Number of Physicians	1061
Percent of Physicians Board Certified Specialists	83.2 %
Medical Residents/Interns	8
Registered Nurses	1029
Licensed Practical Nurses	59

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

FAUQUIER HOSPITAL

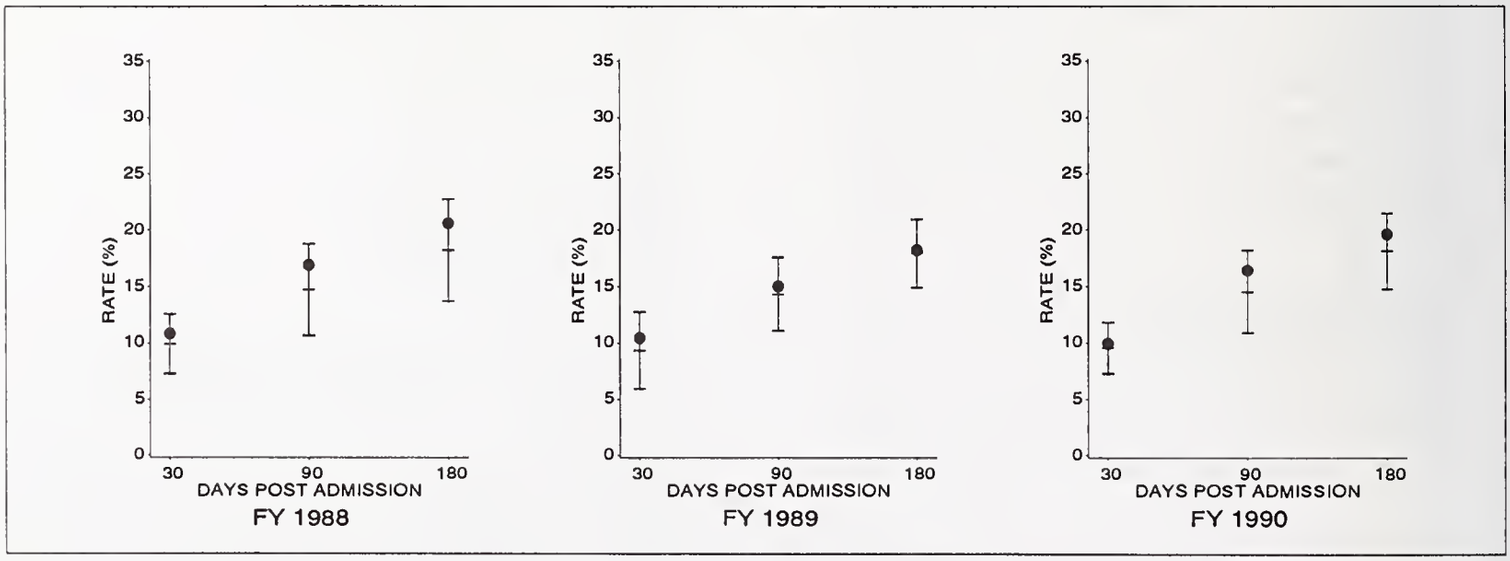
500 HOSPITAL DR
WARRENTON, VA 22186
Medicare Provider Number: 490023

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	911	9.9	9.5	1.1	16.4	14.5	1.8	19.6	18.1	1.7
CONDITIONS:										
Acute Myocardial Infarction	36	25.0	26.8	-----	30.6	29.0	-----	30.6	31.6	-----
Congestive Heart Failure	51	11.8	14.6	8.2	19.6	23.2	9.7	23.5	29.5	11.4
Pneumonia/Influenza	50	16.0	14.5	-----	24.0	20.3	-----	28.0	24.1	-----
Chronic Obstructive Pulmonary Disease	17	23.5	8.8	-----	41.2	15.9	-----	52.9	20.8	-----
Transient Cerebral Ischemia	13	0.0	1.9	-----	7.7	4.3	-----	7.7	6.9	-----
Stroke	49	24.5	22.0	-----	28.6	28.7	-----	32.7	32.9	-----
Hip Fracture	30	10.0	6.0	-----	13.3	11.1	-----	16.7	14.5	-----
Sepsis	11	18.2	20.9	-----	36.4	27.4	-----	36.4	31.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	10	0.0	5.0	-----	10.0	8.6	-----	20.0	11.9	-----
Carotid Endarterectomy	2	0.0	1.0	-----	0.0	1.9	-----	0.0	2.9	-----
Hip Replacement/Reconstruction	27	0.0	3.6	-----	0.0	7.7	-----	3.7	11.1	-----
Open Reduction of Hip Fracture	12	8.3	6.2	-----	16.7	11.6	-----	25.0	15.2	-----
Prostatectomy	22	0.0	0.8	-----	4.5	2.0	-----	4.5	3.4	-----
Cholecystectomy	22	4.5	3.9	-----	4.5	7.4	-----	4.5	9.7	-----
Hysterectomy	3	0.0	0.0	-----	0.0	0.1	-----	0.0	0.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



FAUQUIER HOSPITAL
Medicare Provider Number: 490023

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	56.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.9 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	12.8 %
Admitted for emergency	71.2 %

COMORBIDITIES:

Cancer	7.7 %
Chronic cardiovascular disease	25.1 %
Chronic liver disease	0.5 %
Chronic renal disease	5.5 %
Chronic pulmonary disease	11.2 %
Cerebrovascular degeneration	5.8 %
Diabetes mellitus	6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	70.1%
State	25.7%
Outside State	4.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	106
Occupancy Rate	65.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.8 %
Case Mix Index (CMI)	1.2187

STAFFING:

Total Number of Physicians	53
Percent of Physicians Board Certified Specialists	83.0 %
Medical Residents/Interns	0
Registered Nurses	129
Licensed Practical Nurses	31

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

FRANKLIN MEMORIAL HOSPITAL

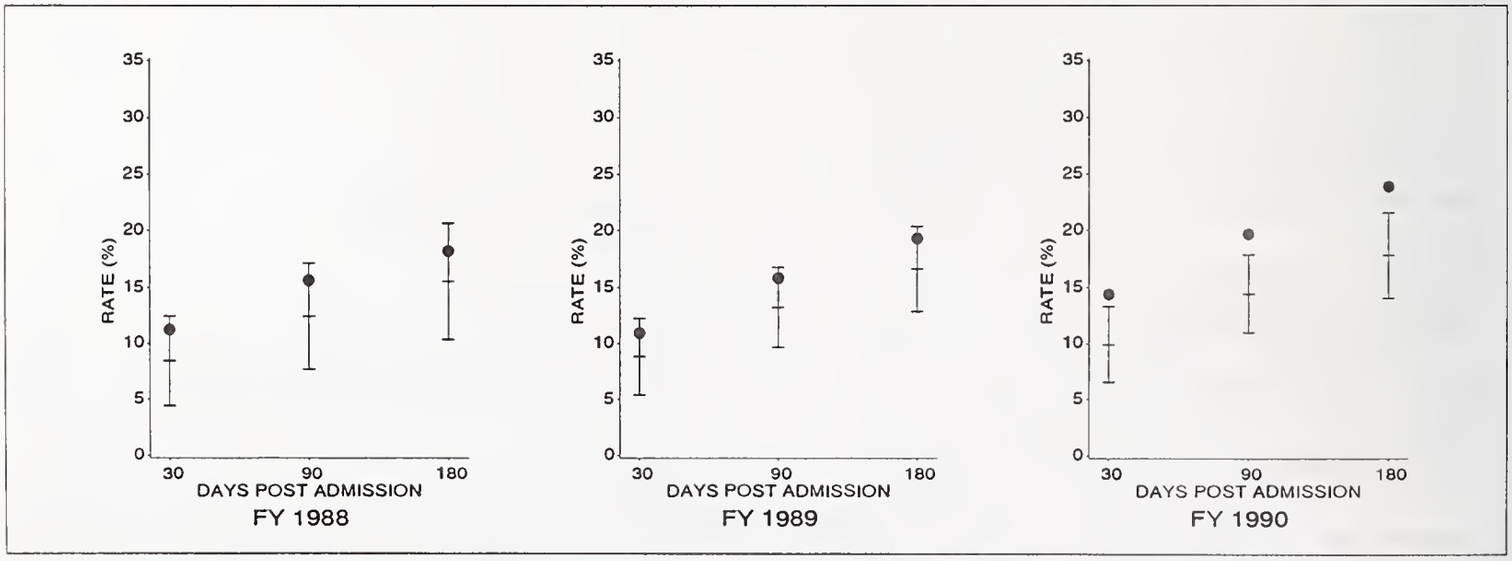
124 FLOYD AVE
ROCKY MOUNT, VA 24151
Medicare Provider Number: 490089

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	452	14.4	9.9	1.7	19.7	14.4	1.7	23.9	17.8	1.9
CONDITIONS:										
Acute Myocardial Infarction	13	23.1	32.9	-----	23.1	36.4	-----	23.1	39.6	-----
Congestive Heart Failure	22	22.7	13.3	-----	40.9	21.3	-----	50.0	27.2	-----
Pneumonia/Influenza	40	25.0	15.2	-----	30.0	20.7	-----	40.0	24.7	-----
Chronic Obstructive Pulmonary Disease	8	0.0	7.5	-----	12.5	12.6	-----	37.5	16.4	-----
Transient Cerebral Ischemia	10	0.0	1.7	-----	0.0	3.9	-----	0.0	6.6	-----
Stroke	16	18.8	17.4	-----	31.3	22.9	-----	37.5	27.0	-----
Hip Fracture	1	0.0	16.3	-----	100.0	34.8	-----	100.0	47.8	-----
Sepsis	14	35.7	26.4	-----	42.9	31.4	-----	50.0	36.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	12	0.0	3.1	-----	0.0	4.8	-----	8.3	5.8	-----
Hysterectomy	7	0.0	0.2	-----	0.0	0.5	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



FRANKLIN MEMORIAL HOSPITAL
Medicare Provider Number: 490089

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	56.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	4.6 %
Admitted for emergency	65.3 %

COMORBIDITIES:

Cancer	6.0 %
Chronic cardiovascular disease	33.2 %
Chronic liver disease	0.7 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	12.6 %
Cerebrovascular degeneration	6.6 %
Diabetes mellitus	9.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	80.7%
State	18.1%
Outside State	1.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	30
Occupancy Rate	60.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.6 %
Case Mix Index (CMI)	1.0493

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

GILES MEMORIAL HOSPITAL

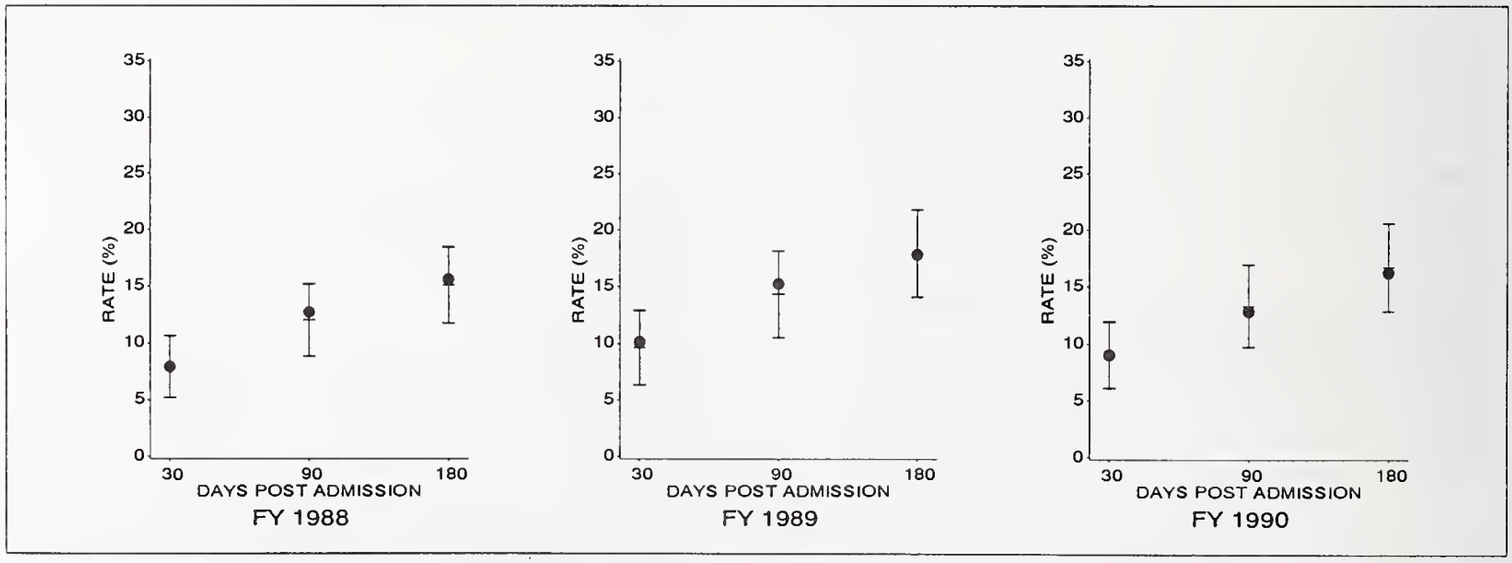
235 S BUCHANAN ST
PEARISBURG, VA 24134
Medicare Provider Number: 490085

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	390	9.0	9.0	1.5	12.8	13.3	1.8	16.2	16.7	1.9
CONDITIONS:										
Acute Myocardial Infarction	19	36.8	28.2	-----	36.8	31.1	-----	36.8	33.8	-----
Congestive Heart Failure	29	6.9	13.7	-----	10.3	22.3	-----	17.2	28.4	-----
Pneumonia/Influenza	26	3.8	10.5	-----	7.7	14.6	-----	7.7	17.7	-----
Chronic Obstructive Pulmonary Disease	5	0.0	3.3	-----	0.0	6.7	-----	0.0	9.7	-----
Transient Cerebral Ischemia	7	0.0	2.0	-----	0.0	4.6	-----	0.0	7.6	-----
Stroke	21	28.6	18.2	-----	28.6	23.5	-----	33.3	27.1	-----
Hip Fracture	0									
Sepsis	6	0.0	20.8	-----	16.7	26.1	-----	33.3	30.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	10	0.0	1.7	-----	0.0	3.5	-----	0.0	4.9	-----
Hysterectomy	1	0.0	0.2	-----	0.0	0.4	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



GILES MEMORIAL HOSPITAL

Medicare Provider Number: 490085

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	56.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	76.7 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	9.7 %
Admitted for emergency	2.3 %

COMORBIDITIES:

Cancer	4.1 %
Chronic cardiovascular disease	39.7 %
Chronic liver disease	0.3 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	22.1 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.0%
State	3.7%
Outside State	15.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	49
Occupancy Rate	32.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	53.6 %
Case Mix Index (CMI)	1.1331

STAFFING:

Total Number of Physicians	22
Percent of Physicians Board Certified Specialists	68.2 %
Medical Residents/Interns	0
Registered Nurses	38
Licensed Practical Nurses	22

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

GILL MEMORIAL EYE EAR NOSE THROAT

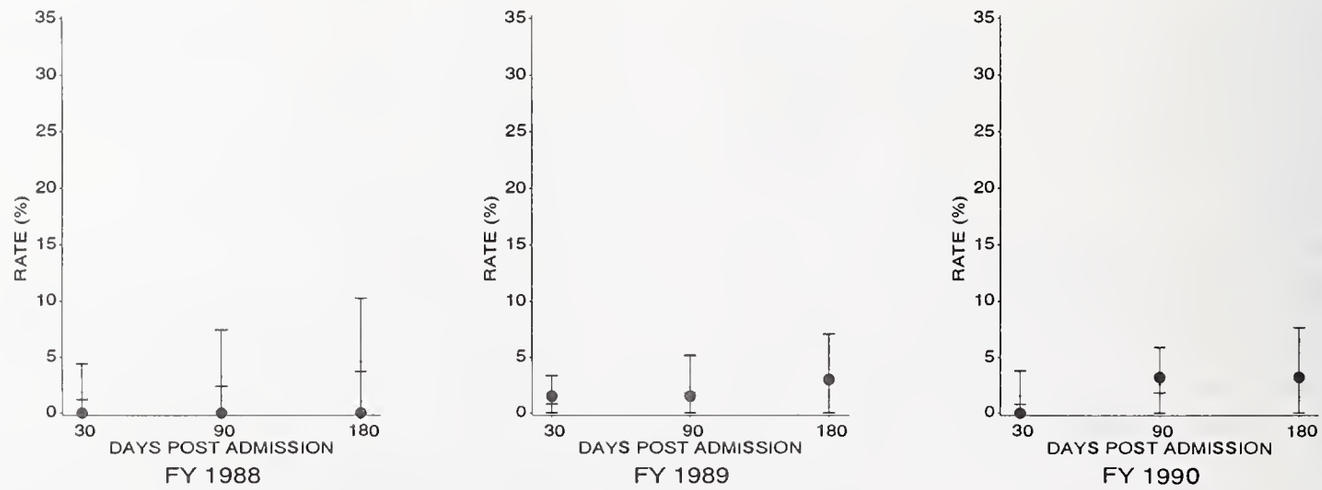
711 S JEFFERSON ST
ROANOKE, VA 24011
Medicare Provider Number: 490083

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	63	0.0	0.8	1.5	3.2	1.8	2.0	3.2	3.0	2.3
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	0									
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



GILL MEMORIAL EYE EAR NOSE THROAT

Medicare Provider Number: 490083

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.8 years
Proportion female	58.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	98.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	96.8 %
Admitted for emergency	1.6 %

COMORBIDITIES:

Cancer	3.2 %
Chronic cardiovascular disease	6.3 %
Chronic liver disease	1.6 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	0.0 %
Cerebrovascular degeneration	1.6 %
Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	30.1%
State	63.1%
Outside State	6.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	1.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	11
Occupancy Rate	9.1 %
Ownership/Control	Private, For Profit
Medicare Discharges	19.3 %
Case Mix Index (CMI)	0.7832

STAFFING:

Total Number of Physicians	10
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	13
Licensed Practical Nurses	4

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

GREENSVILLE MEMORIAL HOSPITAL

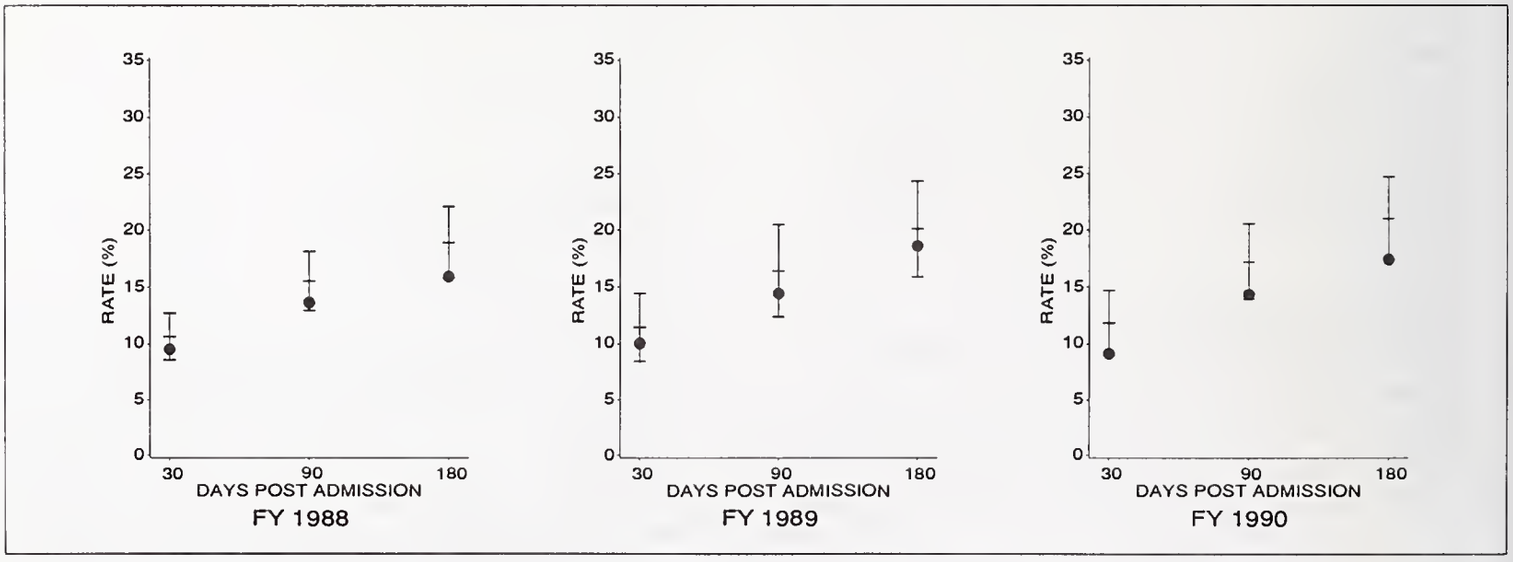
214 WEAVER AVE
EMPORIA, VA 23847
Medicare Provider Number: 490097

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	980	9.1	11.8	1.4	14.3	17.2	1.7	17.4	21.0	1.8
CONDITIONS:										
Acute Myocardial Infarction	64	26.6	35.7	11.5	31.3	39.2	11.6	34.4	42.5	11.2
Congestive Heart Failure	78	6.4	13.4	7.0	14.1	21.7	8.9	19.2	27.9	9.6
Pneumonia/Influenza	91	13.2	15.5	5.5	16.5	21.2	7.0	22.0	24.7	6.9
Chronic Obstructive Pulmonary Disease	12	0.0	3.4	-----	0.0	6.6	-----	0.0	9.7	-----
Transient Cerebral Ischemia	14	0.0	1.5	-----	0.0	3.5	-----	0.0	5.7	-----
Stroke	49	16.3	22.2	-----	26.5	29.7	-----	28.6	34.0	-----
Hip Fracture	8	12.5	6.5	-----	25.0	11.2	-----	37.5	14.0	-----
Sepsis	21	4.8	18.5	-----	9.5	24.9	-----	9.5	28.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	1.1	-----	0.0	2.8	-----	0.0	4.6	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	2	50.0	10.2	-----	50.0	17.3	-----	50.0	21.0	-----
Open Reduction of Hip Fracture	5	0.0	4.1	-----	0.0	7.5	-----	20.0	9.9	-----
Prostatectomy	13	0.0	1.3	-----	0.0	3.2	-----	0.0	5.7	-----
Cholecystectomy	10	0.0	3.1	-----	0.0	6.0	-----	10.0	8.3	-----
Hysterectomy	1	0.0	0.2	-----	0.0	0.4	-----	100.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



GREENSVILLE MEMORIAL HOSPITAL

Medicare Provider Number: 490097

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.5 years
Proportion female	56.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	13.6 %
Admitted for emergency	58.4 %

COMORBIDITIES:

Cancer	5.3 %
Chronic cardiovascular disease	40.6 %
Chronic liver disease	1.2 %
Chronic renal disease	6.4 %
Chronic pulmonary disease	30.9 %
Cerebrovascular degeneration	2.6 %
Diabetes mellitus	10.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	38.6%
State	56.5%
Outside State	4.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	182
Occupancy Rate	57.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1466

STAFFING:

Total Number of Physicians	15
Percent of Physicians Board Certified Specialists	60.0 %
Medical Residents/Interns	0
Registered Nurses	49
Licensed Practical Nurses	71

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

HALIFAX COMMUNITY HOSPITAL

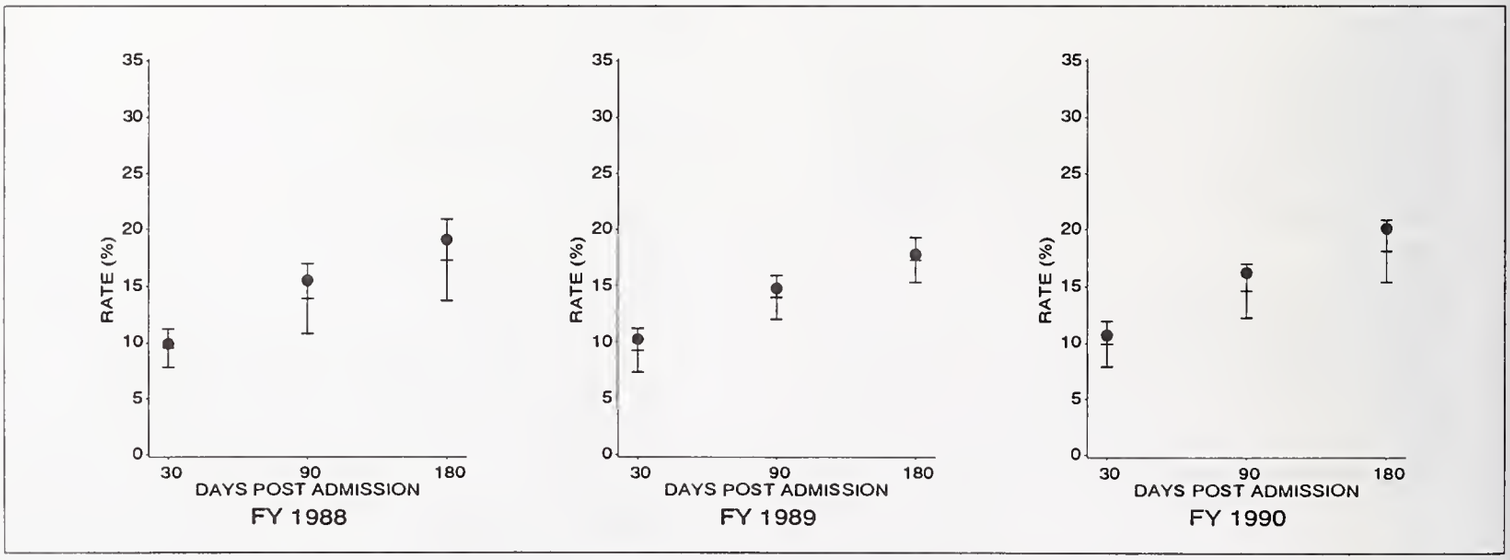
PO BOX 310
SOUTH BOSTON, VA 24592
Medicare Provider Number: 490013

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1511	10.7	9.9	1.0	16.2	14.6	1.2	20.1	18.1	1.4
CONDITIONS:										
Acute Myocardial Infarction	50	30.0	28.4	-----	40.0	31.2	-----	42.0	33.8	-----
Congestive Heart Failure	93	16.1	14.0	4.0	24.7	22.3	4.8	25.8	28.6	5.5
Pneumonia/Influenza	92	23.9	16.3	7.1	31.5	22.0	8.5	33.7	25.8	8.7
Chronic Obstructive Pulmonary Disease	28	0.0	7.0	-----	7.1	12.3	-----	14.3	16.4	-----
Transient Cerebral Ischemia	23	0.0	1.4	-----	4.3	3.3	-----	4.3	5.5	-----
Stroke	68	20.6	21.8	5.2	26.5	28.6	6.0	29.4	32.4	7.1
Hip Fracture	39	10.3	6.6	-----	12.8	11.8	-----	20.5	15.3	-----
Sepsis	21	23.8	19.5	-----	33.3	26.4	-----	42.9	31.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	9	11.1	6.5	-----	11.1	11.2	-----	11.1	14.3	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	25	4.0	4.3	-----	4.0	8.4	-----	8.0	11.4	-----
Open Reduction of Hip Fracture	18	16.7	6.4	-----	22.2	11.5	-----	33.3	14.9	-----
Prostatectomy	21	0.0	1.1	-----	0.0	2.3	-----	4.8	3.7	-----
Cholecystectomy	18	0.0	2.9	-----	11.1	4.9	-----	16.7	6.2	-----
Hysterectomy	20	0.0	1.3	-----	5.0	2.7	-----	5.0	4.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HALIFAX COMMUNITY HOSPITAL
Medicare Provider Number: 490013

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.6 years
Proportion female	55.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	5.4 %
Admitted for emergency	88.7 %

COMORBIDITIES:

Cancer	5.6 %
Chronic cardiovascular disease	32.3 %
Chronic liver disease	0.7 %
Chronic renal disease	3.6 %
Chronic pulmonary disease	13.1 %
Cerebrovascular degeneration	6.8 %
Diabetes mellitus	13.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	19.8%
State	78.7%
Outside State	1.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	192
Occupancy Rate	52.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	40.4 %
Case Mix Index (CMI)	1.1407

STAFFING:

Total Number of Physicians	42
Percent of Physicians Board Certified Specialists	66.7 %
Medical Residents/Interns	0
Registered Nurses	82
Licensed Practical Nurses	71

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HCA CHIPPENHAM HOSPITAL

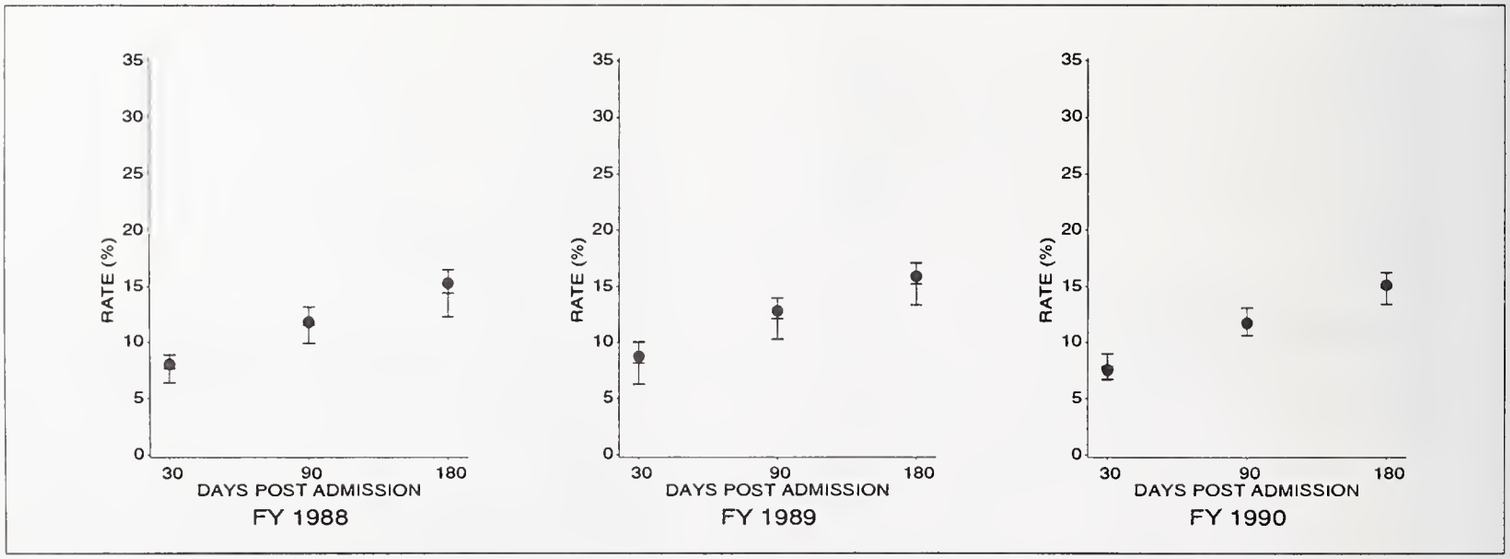
7101 JAHNKE ROAD
RICHMOND, VA 23225
Medicare Provider Number: 490112

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2956	7.5	7.8	0.6	11.7	11.8	0.6	15.1	14.8	0.7
CONDITIONS:										
Acute Myocardial Infarction	103	22.3	23.8	4.7	27.2	26.8	4.8	29.1	29.4	5.2
Congestive Heart Failure	150	10.7	13.5	4.6	15.3	21.3	6.8	25.3	27.2	7.0
Pneumonia/Influenza	73	19.2	17.1	5.2	19.2	23.6	6.3	24.7	27.6	6.2
Chronic Obstructive Pulmonary Disease	9	0.0	6.6	-----	11.1	10.7	-----	11.1	14.2	-----
Transient Cerebral Ischemia	68	0.0	1.5	2.0	1.5	3.4	2.7	1.5	5.5	4.4
Stroke	115	17.4	19.0	3.9	22.6	25.3	4.6	27.8	28.9	4.5
Hip Fracture	69	2.9	6.7	3.7	7.2	11.6	5.2	10.1	14.9	5.5
Sepsis	26	15.4	22.2	-----	23.1	28.1	-----	26.9	32.6	-----
PROCEDURES:										
Angioplasty	48	6.3	3.2	-----	6.3	4.0	-----	8.3	4.9	-----
Coronary Artery Bypass Graft	102	5.9	6.0	3.5	6.9	8.8	4.1	7.8	10.0	4.3
Initial Pacemaker Insertion	27	18.5	2.9	-----	18.5	5.5	-----	18.5	7.9	-----
Carotid Endarterectomy	7	0.0	1.0	-----	0.0	1.8	-----	0.0	2.6	-----
Hip Replacement/Reconstruction	48	0.0	3.6	-----	4.2	6.7	-----	6.3	8.8	-----
Open Reduction of Hip Fracture	18	0.0	7.1	-----	5.6	12.4	-----	11.1	16.1	-----
Prostatectomy	87	1.1	0.8	1.4	3.4	1.7	1.8	3.4	3.0	1.9
Cholecystectomy	46	4.3	1.9	-----	6.5	3.4	-----	6.5	4.5	-----
Hysterectomy	25	0.0	0.8	-----	4.0	1.5	-----	4.0	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HCA CHIPPENHAM HOSPITAL
Medicare Provider Number: 490112

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.1 years
Proportion female	58.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.5 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	23.0 %
Admitted for emergency	53.7 %

COMORBIDITIES:

Cancer	5.7 %
Chronic cardiovascular disease	35.6 %
Chronic liver disease	1.0 %
Chronic renal disease	4.2 %
Chronic pulmonary disease	16.1 %
Cerebrovascular degeneration	3.3 %
Diabetes mellitus	8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	51.9%
State	45.7%
Outside State	2.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	470
Occupancy Rate	63.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	29.8 %
Case Mix Index (CMI)	1.4449

STAFFING:

Total Number of Physicians	248
Percent of Physicians Board Certified Specialists	75.4 %
Medical Residents/Interns	6
Registered Nurses	390
Licensed Practical Nurses	57

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HCA JOHNSTON-WILLIS HOSPITAL

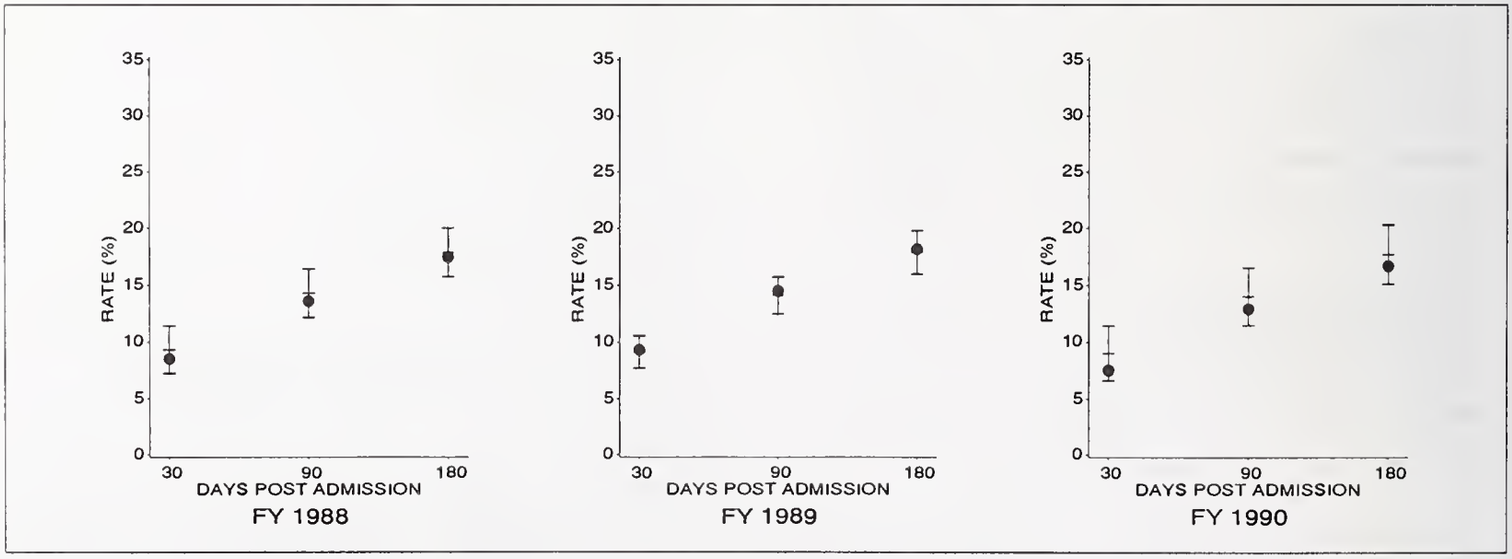
1401 JOHNSTON-WILLIS DR
RICHMOND, VA 23235
Medicare Provider Number: 490028

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2217	7.5	9.0	1.2	12.9	14.0	1.3	16.7	17.7	1.3
CONDITIONS:										
Acute Myocardial Infarction	50	22.0	28.2	-----	30.0	31.7	-----	34.0	34.6	-----
Congestive Heart Failure	87	10.3	15.3	6.6	18.4	23.6	7.3	24.1	29.6	6.9
Pneumonia/Influenza	86	15.1	16.3	4.3	24.4	22.6	6.3	27.9	26.8	6.3
Chronic Obstructive Pulmonary Disease	24	8.3	6.7	-----	25.0	13.0	-----	25.0	17.9	-----
Transient Cerebral Ischemia	49	0.0	1.6	-----	0.0	3.7	-----	0.0	5.9	-----
Stroke	79	13.9	20.2	9.6	20.3	26.1	10.2	22.8	29.8	9.9
Hip Fracture	45	8.9	6.8	-----	11.1	12.2	-----	13.3	15.7	-----
Sepsis	42	21.4	30.2	-----	28.6	38.2	-----	42.9	43.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	9	0.0	1.8	-----	0.0	3.5	-----	0.0	5.2	-----
Carotid Endarterectomy	8	0.0	1.7	-----	0.0	3.0	-----	12.5	4.4	-----
Hip Replacement/Reconstruction	35	8.6	3.9	-----	8.6	7.5	-----	11.4	10.1	-----
Open Reduction of Hip Fracture	3	0.0	3.8	-----	0.0	7.4	-----	0.0	10.6	-----
Prostatectomy	72	1.4	1.0	1.2	2.8	2.4	2.0	2.8	4.0	2.8
Cholecystectomy	40	0.0	2.9	-----	0.0	4.7	-----	0.0	6.1	-----
Hysterectomy	7	0.0	2.7	-----	0.0	6.6	-----	0.0	10.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HCA JOHNSTON-WILLIS HOSPITAL

Medicare Provider Number: 490028

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.9 years
Proportion female	58.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	19.3 %
Admitted for emergency	51.3 %

COMORBIDITIES:

Cancer	11.5 %
Chronic cardiovascular disease	25.5 %
Chronic liver disease	1.2 %
Chronic renal disease	3.7 %
Chronic pulmonary disease	13.5 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	26.4%
State	70.0%
Outside State	3.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	253
Occupancy Rate	64.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.2402

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

HCA LEWIS-GALE HOSPITAL

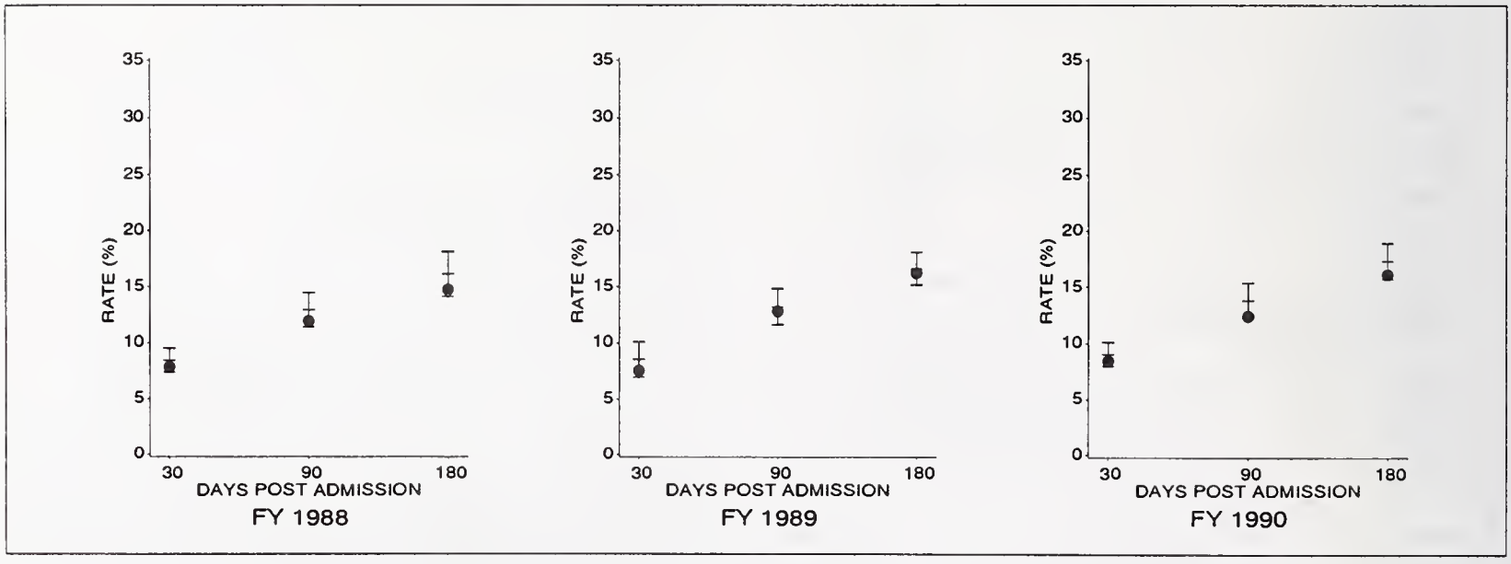
1900 ELECTRIC ROAD
SALEM, VA 24153
Medicare Provider Number: 490048

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3432	8.4	9.0	0.5	12.4	13.8	0.8	16.1	17.3	0.8
CONDITIONS:										
Acute Myocardial Infarction	102	24.5	26.1	4.8	27.5	29.5	4.9	31.4	32.5	4.7
Congestive Heart Failure	200	12.0	14.4	3.9	20.5	22.6	4.4	27.0	28.6	4.2
Pneumonia/Influenza	165	16.4	17.8	3.3	24.2	24.2	3.6	29.1	28.3	3.6
Chronic Obstructive Pulmonary Disease	48	4.2	7.2	-----	14.6	13.0	-----	25.0	17.6	-----
Transient Cerebral Ischemia	50	4.0	1.8	-----	4.0	3.9	-----	6.0	6.2	-----
Stroke	123	18.7	22.5	5.6	24.4	28.5	7.2	26.8	32.3	7.4
Hip Fracture	83	8.4	7.3	3.7	10.8	12.9	5.5	13.3	16.6	7.0
Sepsis	40	20.0	23.8	-----	25.0	30.3	-----	30.0	34.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	25	0.0	3.7	-----	4.0	6.8	-----	8.0	9.5	-----
Carotid Endarterectomy	17	5.9	1.8	-----	5.9	3.3	-----	5.9	4.8	-----
Hip Replacement/Reconstruction	64	1.6	3.3	3.1	1.6	6.3	5.1	3.1	8.5	6.0
Open Reduction of Hip Fracture	45	13.3	6.4	-----	17.8	11.7	-----	20.0	15.6	-----
Prostatectomy	96	0.0	1.1	1.6	2.1	2.5	1.6	2.1	4.3	2.7
Cholecystectomy	79	2.5	2.2	1.8	5.1	4.1	2.4	6.3	5.5	2.7
Hysterectomy	25	0.0	1.0	-----	0.0	2.2	-----	0.0	3.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HCA LEWIS-GALE HOSPITAL
Medicare Provider Number: 490048

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	58.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	9.5 %
Transferred from skilled nursing facility	0.3 %
Admitted for elective procedure	22.9 %
Admitted for emergency	39.1 %

COMORBIDITIES:

Cancer	8.7 %
Chronic cardiovascular disease	40.6 %
Chronic liver disease	1.6 %
Chronic renal disease	3.7 %
Chronic pulmonary disease	14.8 %
Cerebrovascular degeneration	5.0 %
Diabetes mellitus	8.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	21.5%
State	75.7%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	324
Occupancy Rate	87.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	45.6 %
Case Mix Index (CMI)	1.2539

STAFFING:

Total Number of Physicians	136
Percent of Physicians Board Certified Specialists	92.6 %
Medical Residents/Interns	0
Registered Nurses	221
Licensed Practical Nurses	55

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HENRICO DOCTORS HOSPITAL

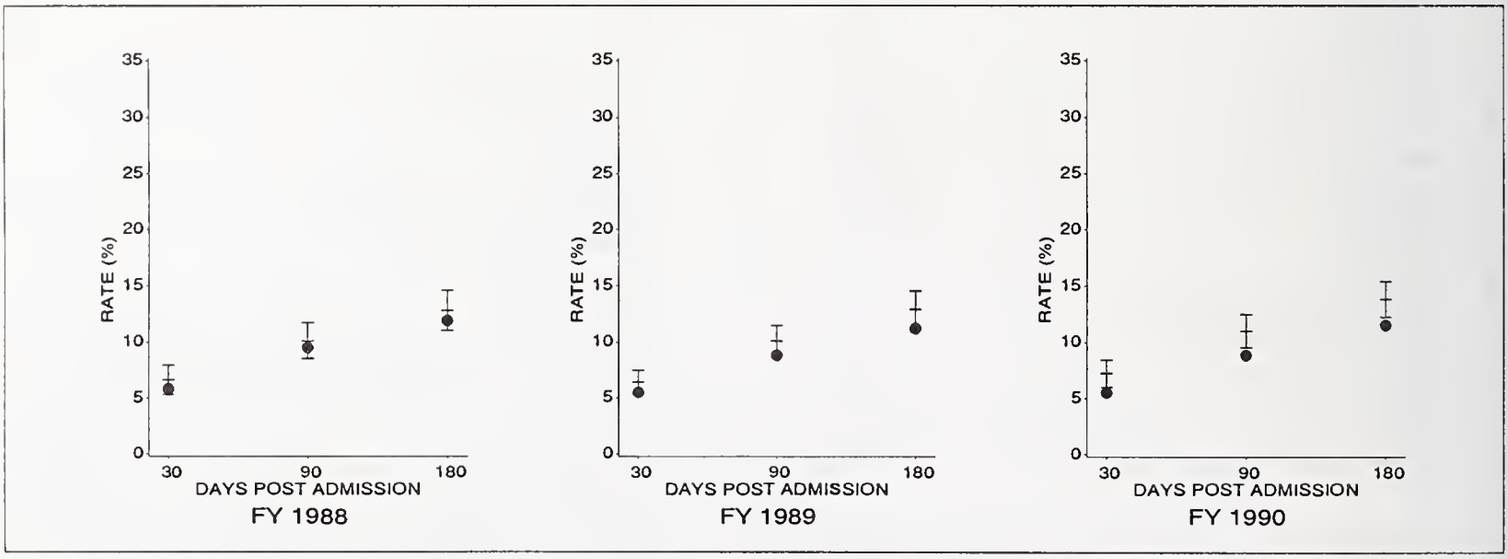
1602 SKIPWITH RD
RICHMOND, VA 23229
Medicare Provider Number: 490118

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3219	5.5	7.2	0.6	8.8	11.0	0.7	11.5	13.8	0.8
CONDITIONS:										
Acute Myocardial Infarction	108	14.8	22.3	5.9	14.8	25.3	6.3	17.6	28.0	6.5
Congestive Heart Failure	134	14.2	14.1	3.0	22.4	22.5	3.6	27.6	28.5	4.0
Pneumonia/Influenza	90	13.3	16.5	4.5	17.8	22.3	6.6	21.1	26.0	6.7
Chronic Obstructive Pulmonary Disease	24	0.0	7.0	-----	8.3	12.2	-----	12.5	16.2	-----
Transient Cerebral Ischemia	56	1.8	2.0	2.6	1.8	4.2	3.9	1.8	6.7	5.3
Stroke	79	21.5	21.5	4.7	27.8	27.4	5.1	27.8	31.0	6.1
Hip Fracture	49	2.0	7.2	-----	4.1	12.1	-----	4.1	15.5	-----
Sepsis	15	20.0	27.6	-----	33.3	34.4	-----	40.0	38.8	-----
PROCEDURES:										
Angioplasty	117	3.4	3.2	1.6	4.3	4.3	2.0	6.0	5.3	2.2
Coronary Artery Bypass Graft	182	3.8	6.2	2.5	4.4	8.9	3.3	6.6	10.1	3.1
Initial Pacemaker Insertion	35	2.9	3.3	-----	5.7	6.3	-----	8.6	9.1	-----
Carotid Endarterectomy	17	11.8	1.9	-----	11.8	3.6	-----	11.8	5.5	-----
Hip Replacement/Reconstruction	93	3.2	2.1	1.8	3.2	3.8	2.0	3.2	5.1	2.8
Open Reduction of Hip Fracture	17	0.0	5.2	-----	5.9	9.0	-----	5.9	11.7	-----
Prostatectomy	68	1.5	0.9	1.3	1.5	2.2	2.8	4.4	3.7	3.7
Cholecystectomy	71	4.2	1.7	2.6	4.2	3.0	2.3	4.2	4.1	2.5
Hysterectomy	34	0.0	0.7	-----	0.0	1.6	-----	0.0	2.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HENRICO DOCTORS HOSPITAL
Medicare Provider Number: 490118

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.8 years
Proportion female	55.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	55.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	37.2 %
Admitted for emergency	38.2 %

COMORBIDITIES:

Cancer	5.9 %
Chronic cardiovascular disease	50.9 %
Chronic liver disease	0.7 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	15.9 %
Cerebrovascular degeneration	2.0 %
Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	27.6%
State	69.6%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	340
Occupancy Rate	78.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.6472

STAFFING:

Total Number of Physicians	358
Percent of Physicians Board Certified Specialists	55.0 %
Medical Residents/Interns	0
Registered Nurses	525
Licensed Practical Nurses	34

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HIRIAM W DAVIS MEDICAL CENTER

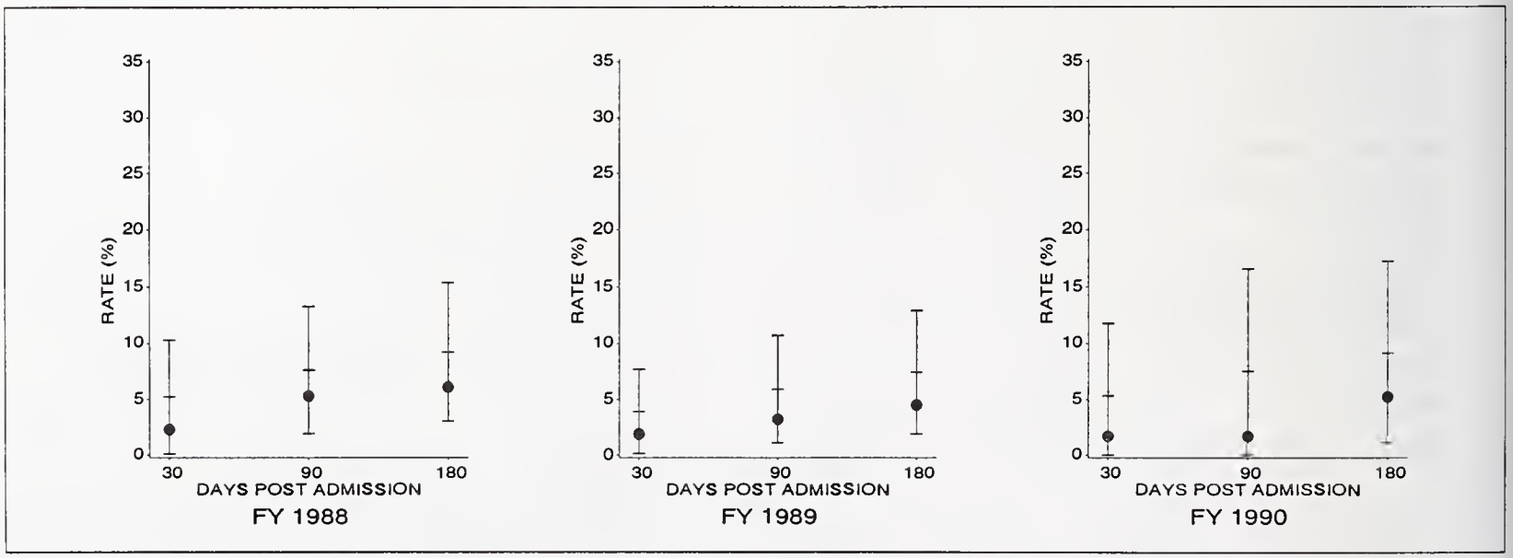
P O BOX 4030
PETERSBURG, VA 23803
Medicare Provider Number: 490104

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	116	1.7	5.3	3.2	1.7	7.5	4.5	5.2	9.1	4.1
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	12	0.0	9.3	-----	0.0	12.6	-----	8.3	15.4	-----
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	2	100.0	45.2	-----	100.0	53.2	-----	100.0	58.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HIRIAM W DAVIS MEDICAL CENTER
Medicare Provider Number: 490104

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	46.6 years
Proportion female	35.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	2.6 %
Transferred from skilled nursing facility	12.9 %
Admitted for elective procedure	37.9 %
Admitted for emergency	12.9 %

COMORBIDITIES:

Cancer	1.7 %
Chronic cardiovascular disease	0.9 %
Chronic liver disease	0.0 %
Chronic renal disease	1.7 %
Chronic pulmonary disease	0.9 %
Cerebrovascular degeneration	2.6 %
Diabetes mellitus	1.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	50.3%
State	49.2%
Outside State	0.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	17
Ownership/Control	State Government
Case Mix Index (CMI)	0.8678

STAFFING:

Medical Residents/Interns	3
Registered Nurses	9
Licensed Practical Nurses	3

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	No
Hospice Care	No
Intensive Care Unit	No
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HUMANA HOSPITAL BAYSIDE

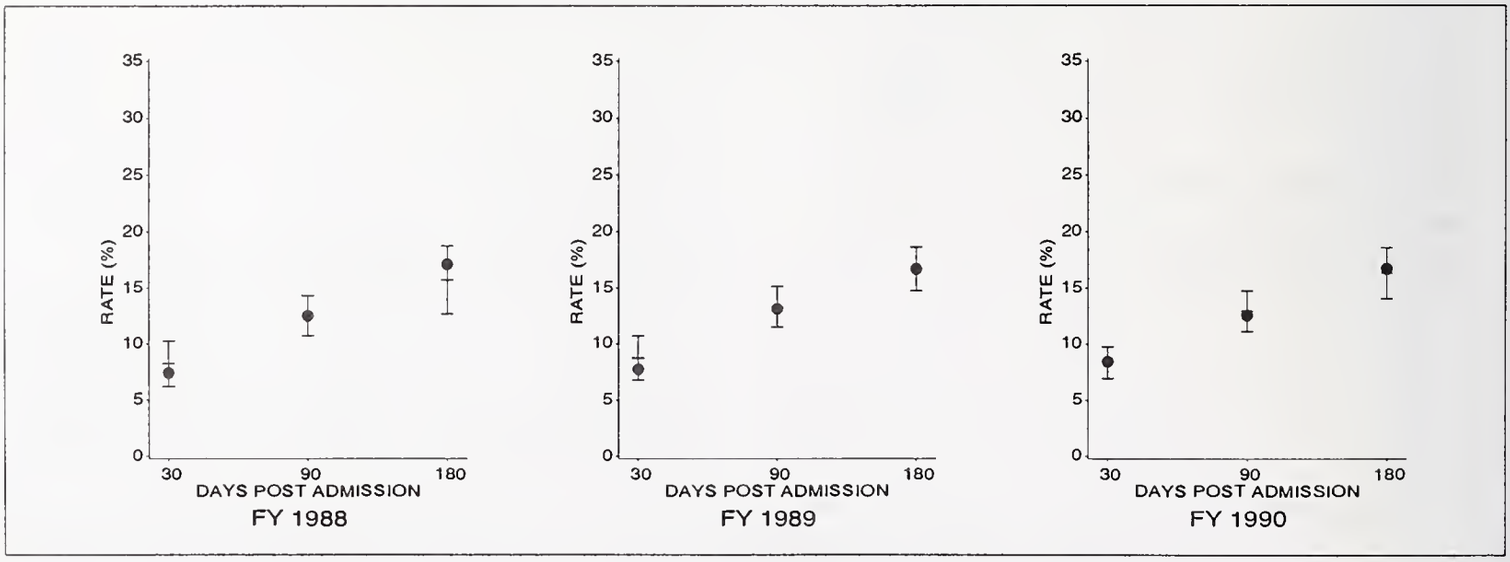
800 INDEPENDENCE BLVD
VIRGINIA BEACH, VA 23455
Medicare Provider Number: 490119

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1555	8.4	8.3	0.7	12.5	12.9	0.9	16.7	16.3	1.1
CONDITIONS:										
Acute Myocardial Infarction	37	32.4	22.7	-----	40.5	25.0	-----	40.5	27.4	-----
Congestive Heart Failure	64	18.8	14.4	6.5	23.4	23.1	9.4	32.8	29.4	8.1
Pneumonia/Influenza	44	9.1	13.2	-----	13.6	18.1	-----	22.7	21.5	-----
Chronic Obstructive Pulmonary Disease	28	7.1	8.7	-----	7.1	14.8	-----	14.3	19.5	-----
Transient Cerebral Ischemia	26	0.0	1.7	-----	3.8	3.7	-----	3.8	5.8	-----
Stroke	53	15.1	16.7	6.4	18.9	22.0	7.5	22.6	25.5	9.1
Hip Fracture	31	9.7	5.0	-----	12.9	9.3	-----	16.1	12.4	-----
Sepsis	24	33.3	31.3	-----	41.7	38.0	-----	45.8	42.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	14	0.0	2.1	-----	0.0	4.3	-----	7.1	6.4	-----
Carotid Endarterectomy	12	0.0	1.3	-----	0.0	2.3	-----	0.0	3.2	-----
Hip Replacement/Reconstruction	15	0.0	3.0	-----	0.0	5.7	-----	0.0	7.7	-----
Open Reduction of Hip Fracture	18	16.7	4.3	-----	22.2	8.2	-----	22.2	11.2	-----
Prostatectomy	58	1.7	0.9	1.6	1.7	2.2	2.1	3.4	3.8	3.2
Cholecystectomy	40	0.0	3.3	-----	5.0	6.7	-----	5.0	9.5	-----
Hysterectomy	10	0.0	0.2	-----	0.0	0.4	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUMANA HOSPITAL BAYSIDE

Medicare Provider Number: 490119

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.9 years
Proportion female	58.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	55.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	44.6 %
Admitted for emergency	51.7 %

COMORBIDITIES:

Cancer	8.0 %
Chronic cardiovascular disease	37.2 %
Chronic liver disease	1.4 %
Chronic renal disease	4.2 %
Chronic pulmonary disease	18.9 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	10.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	68.7%
State	24.2%
Outside State	7.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	250
Ownership/Control	Private, For Profit
Case Mix Index (CMI)	1.3101

STAFFING:

Medical Residents/Interns	0
Registered Nurses	176
Licensed Practical Nurses	39

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HUMANA HOSPITAL CLINCH VALLEY

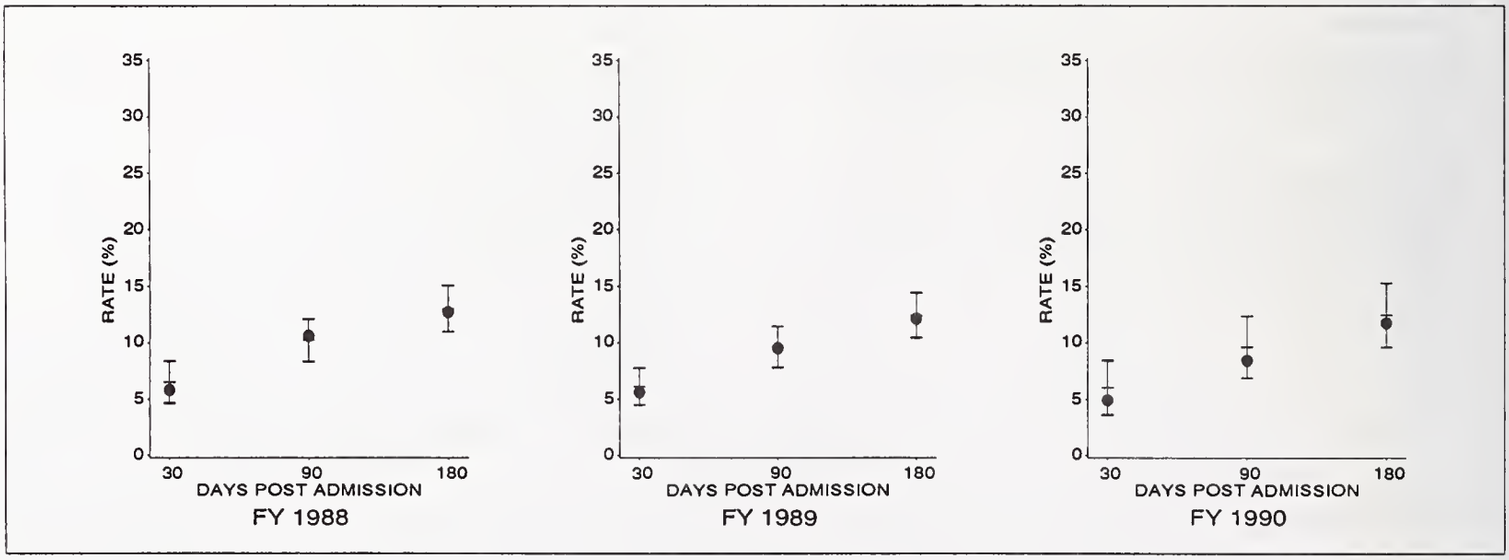
2949 W FRONT ST
RICHLANDS, VA 24641
Medicare Provider Number: 490060

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1260	4.9	6.0	1.2	8.4	9.6	1.4	11.7	12.4	1.4
CONDITIONS:										
Acute Myocardial Infarction	28	28.6	18.3	-----	28.6	20.9	-----	28.6	23.5	-----
Congestive Heart Failure	44	11.4	13.2	-----	20.5	21.3	-----	25.0	27.1	-----
Pneumonia/Influenza	56	10.7	11.7	4.5	16.1	16.2	5.9	19.6	19.5	5.9
Chronic Obstructive Pulmonary Disease	36	8.3	5.6	-----	8.3	10.7	-----	13.9	15.3	-----
Transient Cerebral Ischemia	19	0.0	1.2	-----	10.5	2.8	-----	10.5	4.7	-----
Stroke	29	13.8	14.2	-----	20.7	20.4	-----	31.0	23.9	-----
Hip Fracture	19	0.0	4.9	-----	10.5	8.6	-----	10.5	11.2	-----
Sepsis	13	30.8	26.5	-----	30.8	34.5	-----	38.5	39.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	2.3	-----	0.0	5.3	-----	0.0	8.5	-----
Carotid Endarterectomy	1	0.0	0.5	-----	0.0	1.1	-----	0.0	1.9	-----
Hip Replacement/Reconstruction	5	0.0	3.3	-----	20.0	5.7	-----	20.0	7.6	-----
Open Reduction of Hip Fracture	11	0.0	4.4	-----	0.0	7.8	-----	0.0	10.4	-----
Prostatectomy	23	0.0	1.1	-----	4.3	2.6	-----	8.7	4.5	-----
Cholecystectomy	30	0.0	1.9	-----	0.0	3.6	-----	3.3	4.8	-----
Hysterectomy	10	0.0	0.5	-----	0.0	0.9	-----	0.0	1.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUMANA HOSPITAL CLINCH VALLEY

Medicare Provider Number: 490060

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	67.9 years
Proportion female	50.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	50.8 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	39.3 %
Admitted for emergency	0.7 %

COMORBIDITIES:

Cancer	4.7 %
Chronic cardiovascular disease	43.9 %
Chronic liver disease	1.7 %
Chronic renal disease	1.3 %
Chronic pulmonary disease	31.6 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	11.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	55.8%
State	34.3%
Outside State	9.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	200
Occupancy Rate	57.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	36.3 %
Case Mix Index (CMI)	1.0876

STAFFING:

Total Number of Physicians	62
Percent of Physicians Board Certified Specialists	61.3 %
Medical Residents/Interns	0
Registered Nurses	93
Licensed Practical Nurses	59

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

HUMANA HOSPITAL-RICHMOND

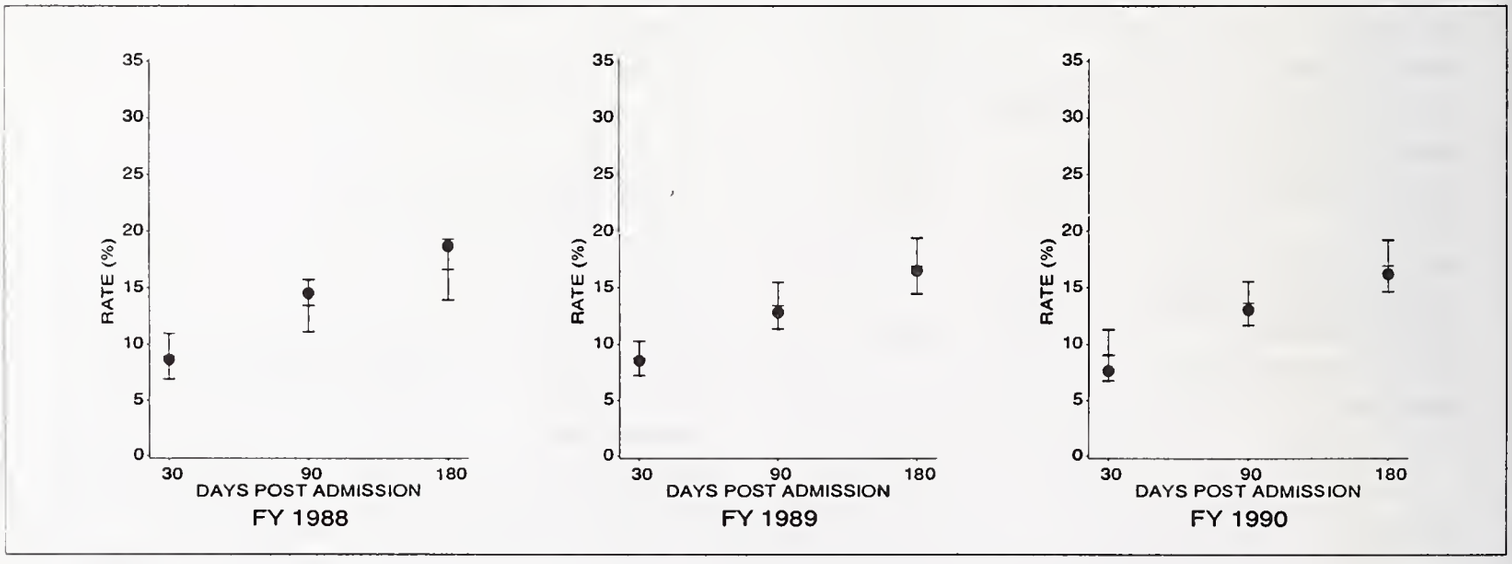
7700 PARHAM RD
RICHMOND, VA 23229
Medicare Provider Number: 490015

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1500	7.6	9.0	1.1	13.0	13.6	1.0	16.2	16.9	1.2
CONDITIONS:										
Acute Myocardial Infarction	36	22.2	27.6	-----	22.2	30.3	-----	22.2	32.7	-----
Congestive Heart Failure	66	10.6	13.8	7.9	18.2	22.5	9.0	24.2	28.7	9.2
Pneumonia/Influenza	61	9.8	15.5	6.3	13.1	21.1	7.8	13.1	24.8	9.3
Chronic Obstructive Pulmonary Disease	16	12.5	10.8	-----	31.3	18.7	-----	31.3	23.9	-----
Transient Cerebral Ischemia	21	0.0	1.7	-----	0.0	3.6	-----	0.0	5.7	-----
Stroke	68	14.7	18.6	5.9	25.0	23.9	5.3	27.9	27.3	6.1
Hip Fracture	41	9.8	7.4	-----	17.1	13.7	-----	17.1	18.0	-----
Sepsis	13	15.4	29.8	-----	30.8	41.2	-----	38.5	47.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	13	0.0	3.4	-----	15.4	6.7	-----	15.4	10.0	-----
Carotid Endarterectomy	8	0.0	0.8	-----	0.0	1.6	-----	0.0	2.5	-----
Hip Replacement/Reconstruction	32	6.3	4.3	-----	6.3	8.1	-----	6.3	11.0	-----
Open Reduction of Hip Fracture	22	9.1	6.0	-----	18.2	11.6	-----	18.2	15.7	-----
Prostatectomy	41	0.0	1.1	-----	4.9	2.4	-----	7.3	3.8	-----
Cholecystectomy	27	0.0	1.6	-----	3.7	2.9	-----	7.4	4.1	-----
Hysterectomy	9	0.0	1.2	-----	11.1	2.6	-----	11.1	4.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUMANA HOSPITAL-RICHMOND
Medicare Provider Number: 490015

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.4 years
Proportion female	59.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	47.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	25.4 %
Admitted for emergency	52.5 %

COMORBIDITIES:

Cancer	8.3 %
Chronic cardiovascular disease	32.4 %
Chronic liver disease	1.0 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	14.5 %
Cerebrovascular degeneration	3.6 %
Diabetes mellitus	11.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	28.7%
State	68.4%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	200
Occupancy Rate	44.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	56.1 %
Case Mix Index (CMI)	1.3629

STAFFING:

Total Number of Physicians	113
Percent of Physicians Board Certified Specialists	89.4 %
Medical Residents/Interns	0
Registered Nurses	114
Licensed Practical Nurses	55

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

JEFFERSON HOSPITAL

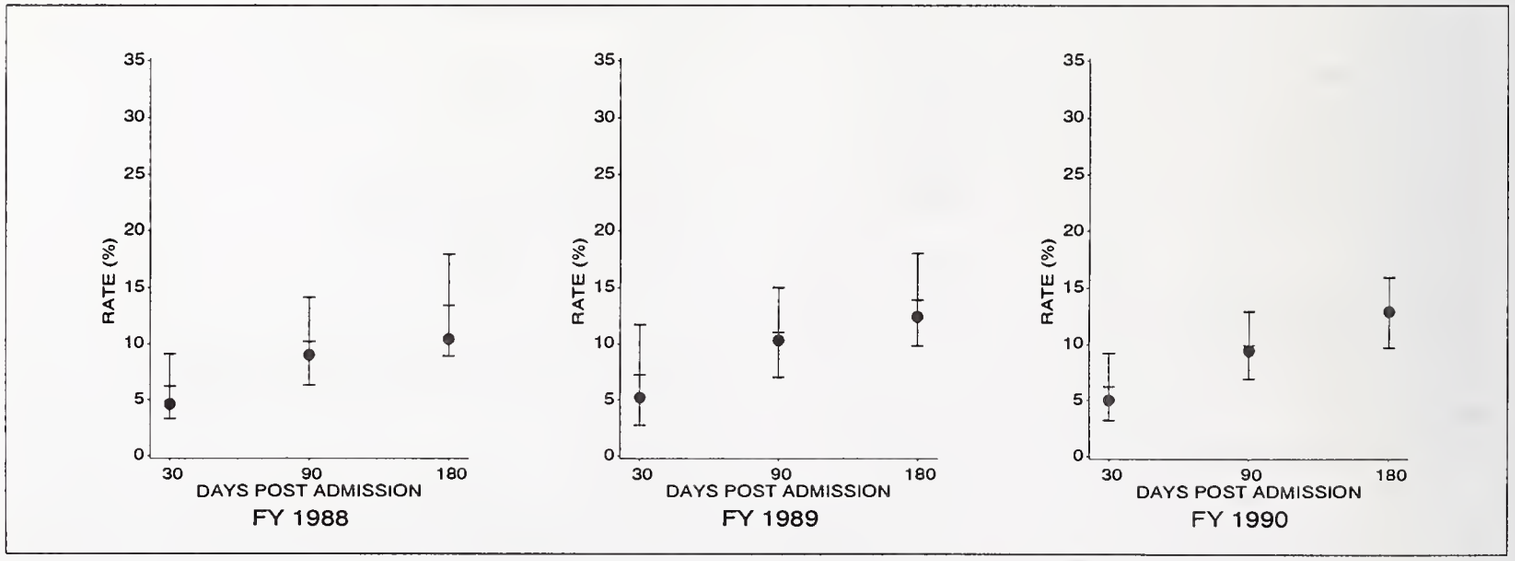
4600 KING STREET
ALEXANDRIA, VA 22302
Medicare Provider Number: 490008

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	459	5.0	6.2	1.5	9.4	9.9	1.5	12.9	12.8	1.6
CONDITIONS:										
Acute Myocardial Infarction	4	0.0	18.3	-----	0.0	20.1	-----	0.0	22.0	-----
Congestive Heart Failure	24	4.2	11.3	-----	12.5	18.2	-----	20.8	24.1	-----
Pneumonia/Influenza	18	5.6	15.4	-----	11.1	21.2	-----	16.7	25.9	-----
Chronic Obstructive Pulmonary Disease	5	0.0	9.9	-----	0.0	17.9	-----	20.0	23.0	-----
Transient Cerebral Ischemia	10	0.0	1.2	-----	10.0	2.6	-----	10.0	4.2	-----
Stroke	13	7.7	14.5	-----	23.1	21.1	-----	23.1	25.3	-----
Hip Fracture	2	0.0	4.9	-----	0.0	9.3	-----	0.0	13.7	-----
Sepsis	6	50.0	27.7	-----	50.0	35.9	-----	50.0	40.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	2.0	-----	0.0	4.2	-----	0.0	6.6	-----
Carotid Endarterectomy	2	0.0	0.9	-----	0.0	1.7	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	5	0.0	0.3	-----	20.0	0.6	-----	20.0	0.8	-----
Open Reduction of Hip Fracture	1	0.0	4.4	-----	0.0	9.2	-----	0.0	13.8	-----
Prostatectomy	8	0.0	1.9	-----	0.0	4.0	-----	12.5	6.1	-----
Cholecystectomy	7	0.0	1.2	-----	0.0	2.3	-----	0.0	3.0	-----
Hysterectomy	6	0.0	0.2	-----	0.0	0.5	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



JEFFERSON HOSPITAL
Medicare Provider Number: 490008

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	63.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	55.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	52.9 %
Admitted for emergency	38.1 %

COMORBIDITIES:

Cancer	3.9 %
Chronic cardiovascular disease	28.5 %
Chronic liver disease	0.9 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	14.4 %
Cerebrovascular degeneration	5.2 %
Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	43.9%
State	46.9%
Outside State	9.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	70
Occupancy Rate	67.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	21.0 %
Case Mix Index (CMI)	1.1147

STAFFING:

Total Number of Physicians	97
Percent of Physicians Board Certified Specialists	76.3 %
Medical Residents/Interns	0
Registered Nurses	94
Licensed Practical Nurses	10

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

JOHN RANDOLPH HOSPITAL

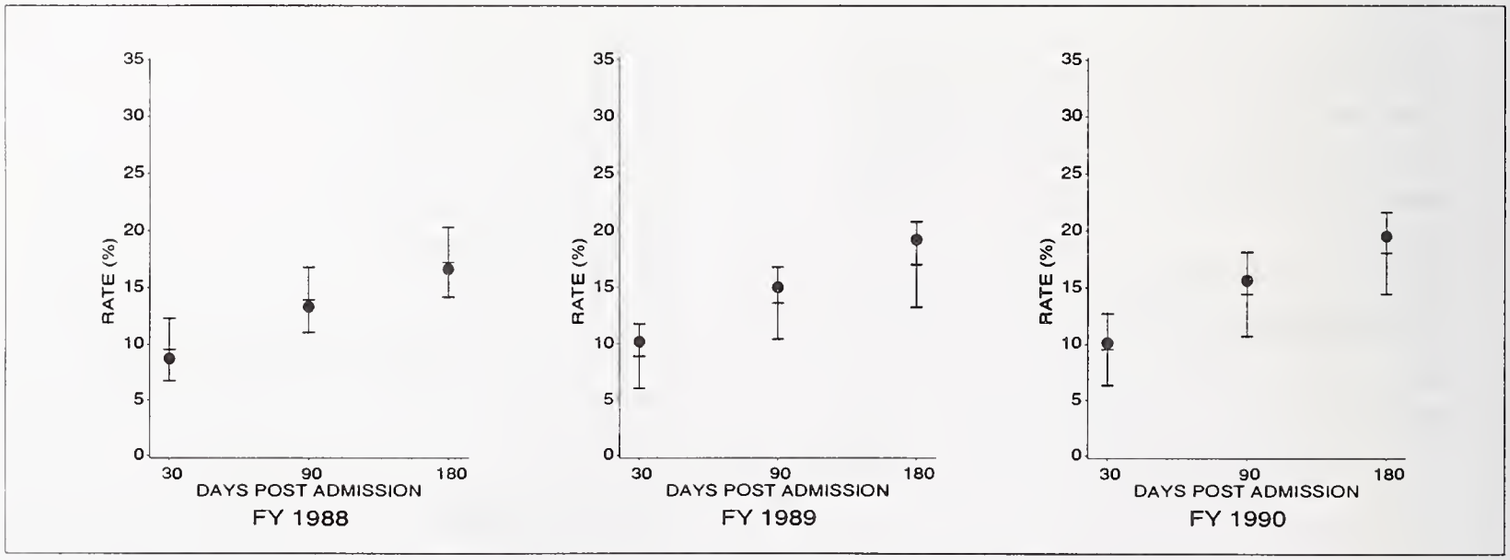
411 W RANDOLPH RD
HOPEWELL, VA 23860
Medicare Provider Number: 490020

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1150	10.1	9.5	1.6	15.6	14.4	1.9	19.5	18.0	1.8
CONDITIONS:										
Acute Myocardial Infarction	43	34.9	27.5	-----	39.5	30.5	-----	44.2	33.1	-----
Congestive Heart Failure	60	11.7	14.3	7.3	21.7	22.7	12.4	31.7	29.0	10.8
Pneumonia/Influenza	67	11.9	12.6	5.4	17.9	17.3	4.7	22.4	20.5	5.6
Chronic Obstructive Pulmonary Disease	28	10.7	6.9	-----	14.3	12.9	-----	17.9	17.4	-----
Transient Cerebral Ischemia	22	0.0	1.2	-----	0.0	2.9	-----	0.0	5.0	-----
Stroke	62	4.8	17.2	6.5	4.8	23.2	8.3	12.9	27.1	7.5
Hip Fracture	37	8.1	4.2	-----	21.6	7.8	-----	21.6	10.6	-----
Sepsis	10	20.0	15.6	-----	30.0	21.5	-----	30.0	25.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	8	0.0	4.3	-----	0.0	7.4	-----	12.5	10.2	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	14	0.0	5.1	-----	35.7	11.4	-----	35.7	17.1	-----
Open Reduction of Hip Fracture	27	11.1	3.7	-----	18.5	7.1	-----	18.5	9.8	-----
Prostatectomy	22	4.5	0.7	-----	4.5	1.7	-----	4.5	3.0	-----
Cholecystectomy	22	0.0	1.4	-----	0.0	2.4	-----	0.0	3.1	-----
Hysterectomy	2	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



JOHN RANDOLPH HOSPITAL
Medicare Provider Number: 490020

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	57.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	60.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	10.3 %
Admitted for emergency	38.9 %

COMORBIDITIES:

Cancer	7.7 %
Chronic cardiovascular disease	29.1 %
Chronic liver disease	1.0 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	12.9 %
Cerebrovascular degeneration	3.6 %
Diabetes mellitus	8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	48.4%
State	49.5%
Outside State	2.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	136
Occupancy Rate	69.0 %
Ownership/Control	District/Authority
Medicare Discharges	33.8 %
Case Mix Index (CMI)	1.0754

STAFFING:

Total Number of Physicians	72
Percent of Physicians Board Certified Specialists	73.6 %
Medical Residents/Interns	0
Registered Nurses	97
Licensed Practical Nurses	46

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

JOHNSTON MEMORIAL HOSPITAL

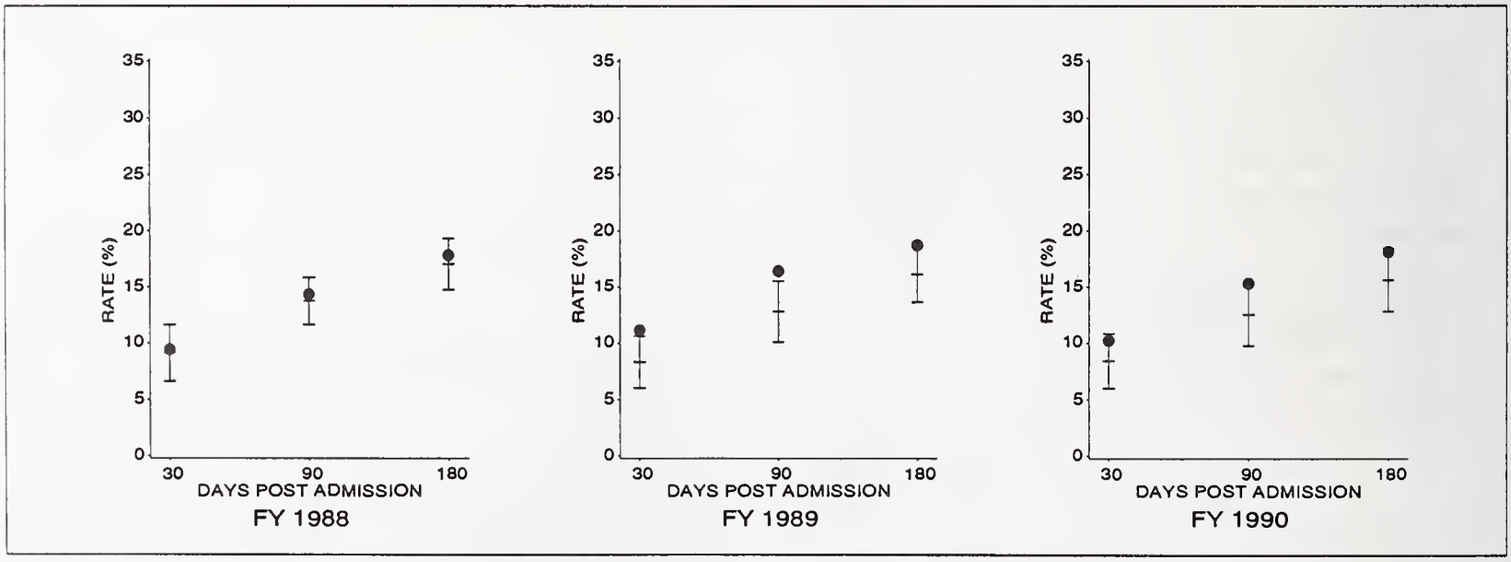
351 N COURT ST
ABINGDON, VA 24210
Medicare Provider Number: 490053

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1251	10.2	8.4	1.2	15.3	12.5	1.4	18.1	15.6	1.4
CONDITIONS:										
Acute Myocardial Infarction	47	40.4	27.2	-----	40.4	29.7	-----	40.4	32.4	-----
Congestive Heart Failure	70	22.9	14.1	6.5	37.1	21.7	9.5	38.6	27.6	7.9
Pneumonia/Influenza	164	17.1	14.4	4.1	23.2	20.0	3.8	28.7	24.0	4.4
Chronic Obstructive Pulmonary Disease	30	6.7	4.6	-----	16.7	8.6	-----	16.7	12.1	-----
Transient Cerebral Ischemia	18	0.0	2.2	-----	0.0	5.0	-----	5.6	8.2	-----
Stroke	39	15.4	15.7	-----	17.9	21.2	-----	17.9	24.9	-----
Hip Fracture	52	1.9	5.1	4.1	5.8	9.2	4.8	7.7	12.4	6.2
Sepsis	15	20.0	20.6	-----	26.7	28.9	-----	26.7	33.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	9.2	-----	0.0	16.2	-----	0.0	20.5	-----
Carotid Endarterectomy	4	0.0	1.2	-----	0.0	2.5	-----	0.0	4.1	-----
Hip Replacement/Reconstruction	42	2.4	3.4	-----	4.8	6.2	-----	7.1	8.4	-----
Open Reduction of Hip Fracture	17	0.0	4.7	-----	5.9	8.8	-----	5.9	12.1	-----
Prostatectomy	36	0.0	1.2	-----	0.0	2.9	-----	0.0	4.8	-----
Cholecystectomy	35	2.9	2.4	-----	2.9	4.5	-----	5.7	6.1	-----
Hysterectomy	16	0.0	0.1	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



JOHNSTON MEMORIAL HOSPITAL
Medicare Provider Number: 490053

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.2 years
Proportion female	55.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	35.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	35.4 %
Admitted for emergency	0.1 %

COMORBIDITIES:

Cancer	4.4 %
Chronic cardiovascular disease	33.2 %
Chronic liver disease	1.0 %
Chronic renal disease	1.0 %
Chronic pulmonary disease	23.3 %
Cerebrovascular degeneration	5.7 %
Diabetes mellitus	5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	59.4%
State	35.2%
Outside State	5.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	138
Occupancy Rate	52.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	38.5 %
Case Mix Index (CMI)	1.1941

STAFFING:

Total Number of Physicians	41
Percent of Physicians Board Certified Specialists	87.8 %
Medical Residents/Interns	0
Registered Nurses	114
Licensed Practical Nurses	53

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

KINGS DAUGHTERS HOSPITAL

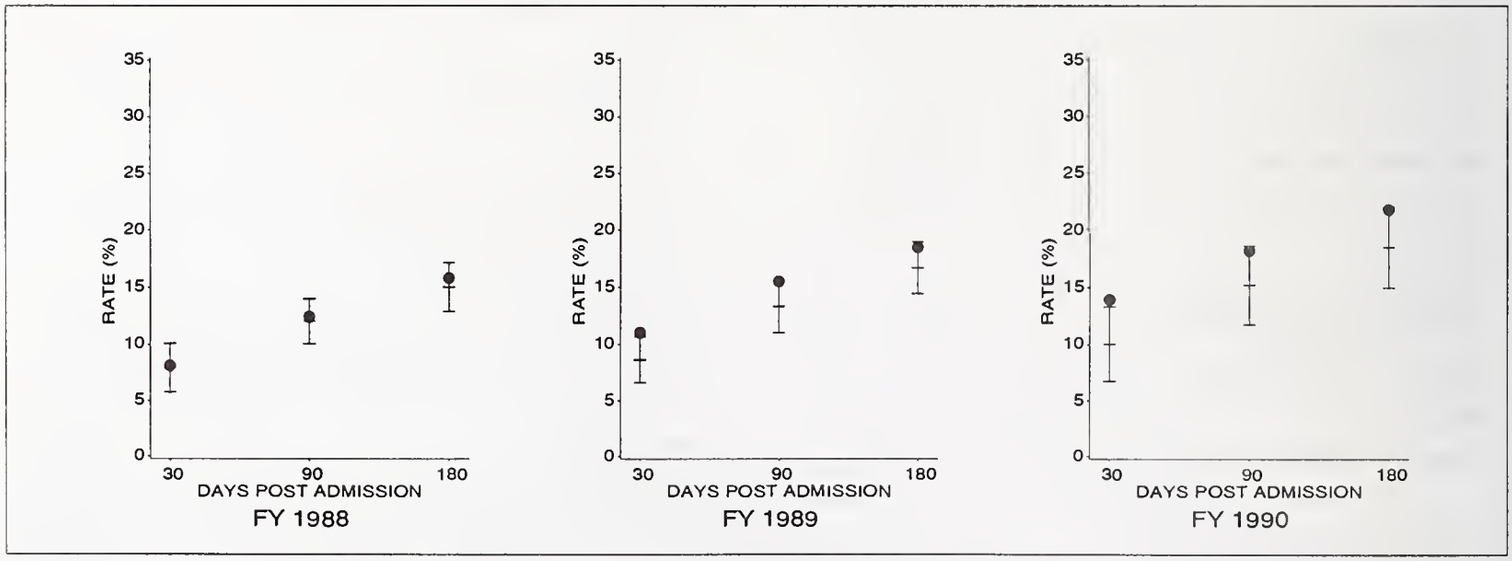
1410 N AUGUSTA AVE
STAUNTON, VA 24401
Medicare Provider Number: 490029

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	696	13.9	10.0	1.6	18.2	15.2	1.7	21.8	18.5	1.8
CONDITIONS:										
Acute Myocardial Infarction	42	31.0	23.7	-----	31.0	26.8	-----	38.1	29.0	-----
Congestive Heart Failure	31	22.6	14.8	-----	29.0	24.1	-----	38.7	29.8	-----
Pneumonia/Influenza	70	12.9	14.0	5.0	20.0	19.7	4.9	22.9	23.0	5.1
Chronic Obstructive Pulmonary Disease	2	0.0	6.8	-----	0.0	12.4	-----	0.0	16.1	-----
Transient Cerebral Ischemia	14	0.0	1.7	-----	0.0	3.7	-----	0.0	5.8	-----
Stroke	30	30.0	18.2	-----	33.3	25.3	-----	36.7	28.8	-----
Hip Fracture	20	15.0	8.8	-----	20.0	15.4	-----	25.0	19.0	-----
Sepsis	4	0.0	25.7	-----	0.0	36.0	-----	25.0	40.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	1.3	-----	0.0	2.8	-----	0.0	4.2	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	7	0.0	4.1	-----	0.0	8.4	-----	0.0	11.5	-----
Open Reduction of Hip Fracture	12	16.7	6.6	-----	25.0	12.2	-----	33.3	15.7	-----
Prostatectomy	34	0.0	0.6	-----	0.0	1.5	-----	0.0	2.6	-----
Cholecystectomy	7	0.0	1.6	-----	14.3	2.9	-----	14.3	3.6	-----
Hysterectomy	4	0.0	0.1	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



KINGS DAUGHTERS HOSPITAL
Medicare Provider Number: 490029

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	57.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	65.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	18.7 %
Admitted for emergency	64.9 %

COMORBIDITIES:

Cancer	7.6 %
Chronic cardiovascular disease	29.0 %
Chronic liver disease	1.0 %
Chronic renal disease	2.7 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	3.3 %
Diabetes mellitus	7.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	56.2%
State	42.4%
Outside State	1.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	122
Occupancy Rate	69.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.7 %
Case Mix Index (CMI)	1.1174

STAFFING:

Total Number of Physicians	66
Percent of Physicians Board Certified Specialists	66.7 %
Medical Residents/Interns	0
Registered Nurses	120
Licensed Practical Nurses	79

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

LEE COUNTY HOSPITAL

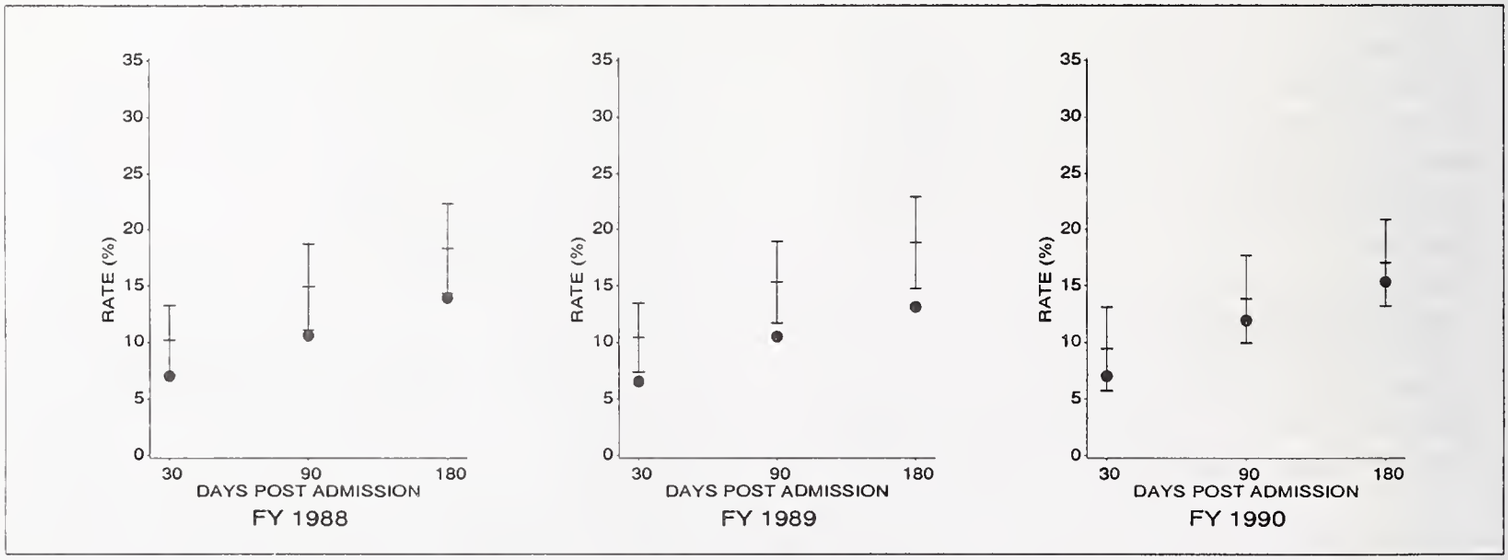
HARRELL ST
PENNINGTON GAP, VA 24277
Medicare Provider Number: 490012

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	681	7.0	9.4	1.9	11.9	13.8	1.9	15.3	17.0	1.9
CONDITIONS:										
Acute Myocardial Infarction	26	30.8	29.3	-----	38.5	32.3	-----	38.5	35.7	-----
Congestive Heart Failure	33	3.0	13.5	-----	15.2	21.4	-----	27.3	27.1	-----
Pneumonia/Influenza	58	5.2	13.4	6.3	8.6	18.6	7.6	8.6	21.9	8.5
Chronic Obstructive Pulmonary Disease	16	0.0	3.8	-----	12.5	7.5	-----	12.5	10.5	-----
Transient Cerebral Ischemia	4	0.0	1.4	-----	0.0	3.4	-----	0.0	6.0	-----
Stroke	33	18.2	23.6	-----	33.3	30.4	-----	39.4	34.0	-----
Hip Fracture	15	6.7	5.5	-----	13.3	9.8	-----	20.0	12.7	-----
Sepsis	2	0.0	7.2	-----	0.0	9.9	-----	0.0	12.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	9	11.1	4.8	-----	22.2	8.7	-----	33.3	11.5	-----
Open Reduction of Hip Fracture	7	0.0	5.3	-----	0.0	9.8	-----	0.0	12.8	-----
Prostatectomy	9	0.0	0.6	-----	11.1	1.3	-----	11.1	2.4	-----
Cholecystectomy	17	5.9	2.2	-----	11.8	3.5	-----	11.8	4.4	-----
Hysterectomy	6	0.0	0.2	-----	0.0	0.6	-----	0.0	1.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LEE COUNTY HOSPITAL
Medicare Provider Number: 490012

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.3 years
Proportion female	54.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	35.2 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	0.0 %
Admitted for emergency	97.7 %

COMORBIDITIES:

Cancer	4.0 %
Chronic cardiovascular disease	40.2 %
Chronic liver disease	0.9 %
Chronic renal disease	1.0 %
Chronic pulmonary disease	27.6 %
Cerebrovascular degeneration	2.9 %
Diabetes mellitus	5.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	91.8%
State	5.1%
Outside State	3.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	80
Occupancy Rate	42.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.0474

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

LONESOME PINE HOSPITAL

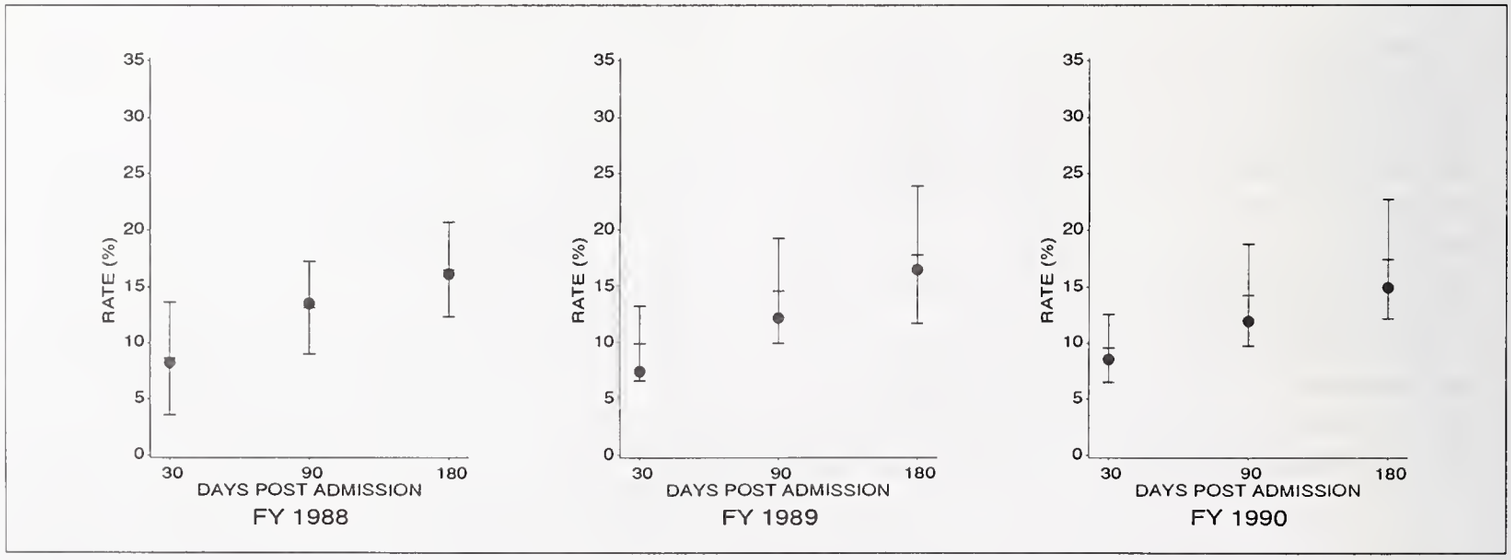
HOLTON AVE, DRAWER 1
BIG STONE GAP, VA 24219
Medicare Provider Number: 490114

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	531	8.5	9.5	1.5	11.9	14.2	2.3	14.9	17.4	2.6
CONDITIONS:										
Acute Myocardial Infarction	15	20.0	26.9	-----	20.0	29.3	-----	20.0	32.2	-----
Congestive Heart Failure	17	11.8	12.2	-----	29.4	20.1	-----	41.2	26.1	-----
Pneumonia/Influenza	40	10.0	16.0	-----	12.5	22.2	-----	17.5	26.6	-----
Chronic Obstructive Pulmonary Disease	15	0.0	9.1	-----	0.0	15.9	-----	6.7	20.6	-----
Transient Cerebral Ischemia	7	0.0	1.5	-----	0.0	3.5	-----	0.0	6.1	-----
Stroke	24	29.2	15.8	-----	33.3	23.7	-----	33.3	27.5	-----
Hip Fracture	18	5.6	6.9	-----	5.6	12.8	-----	5.6	17.0	-----
Sepsis	4	25.0	28.4	-----	25.0	35.2	-----	25.0	39.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	0.0	4.1	-----	0.0	7.5	-----	0.0	9.7	-----
Open Reduction of Hip Fracture	11	0.0	6.9	-----	0.0	13.4	-----	0.0	18.4	-----
Prostatectomy	5	0.0	0.9	-----	20.0	2.0	-----	20.0	3.3	-----
Cholecystectomy	9	0.0	1.9	-----	0.0	3.5	-----	0.0	4.6	-----
Hysterectomy	4	0.0	0.1	-----	0.0	0.2	-----	0.0	0.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LONESOME PINE HOSPITAL
Medicare Provider Number: 490114

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.0 years
Proportion female	49.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	35.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	62.3 %

COMORBIDITIES:

Cancer	5.6 %
Chronic cardiovascular disease	32.4 %
Chronic liver disease	0.4 %
Chronic renal disease	0.9 %
Chronic pulmonary disease	24.1 %
Cerebrovascular degeneration	3.2 %
Diabetes mellitus	14.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.0%
State	25.7%
Outside State	9.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	60
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	37.8 %
Case Mix Index (CMI)	1.0148

STAFFING:

Total Number of Physicians	18
Percent of Physicians Board Certified Specialists	83.3 %
Medical Residents/Interns	0
Registered Nurses	53
Licensed Practical Nurses	24

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

LOUDOUN HOSPITAL CENTER

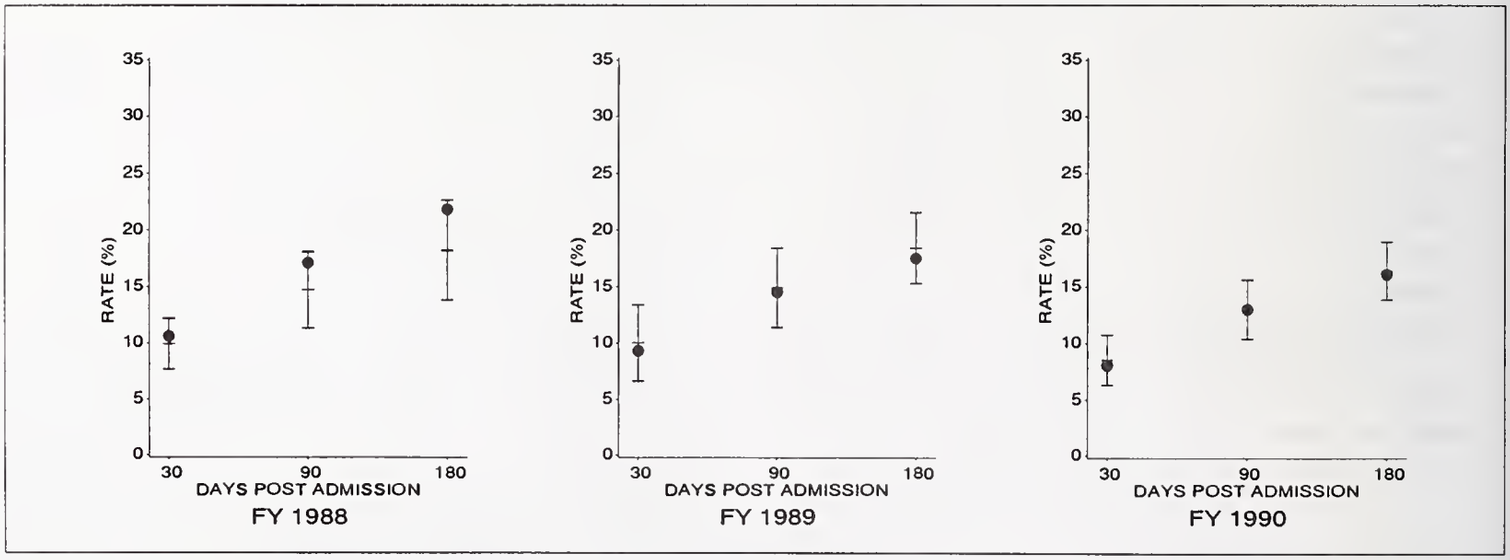
224 CORNWALL STREET NW
LEESBURG, VA 22075
Medicare Provider Number: 490043

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	837	8.0	8.5	1.1	13.0	13.0	1.3	16.1	16.4	1.3
CONDITIONS:										
Acute Myocardial Infarction	21	9.5	26.1	-----	9.5	28.8	-----	14.3	31.6	-----
Congestive Heart Failure	45	8.9	14.7	-----	20.0	23.1	-----	24.4	28.8	-----
Pneumonia/Influenza	43	20.9	15.6	-----	25.6	21.9	-----	30.2	25.9	-----
Chronic Obstructive Pulmonary Disease	20	5.0	5.1	-----	20.0	9.9	-----	20.0	13.7	-----
Transient Cerebral Ischemia	9	0.0	2.3	-----	0.0	5.4	-----	11.1	8.9	-----
Stroke	34	11.8	15.5	-----	14.7	22.5	-----	17.6	26.2	-----
Hip Fracture	29	10.3	6.3	-----	13.8	11.1	-----	13.8	14.4	-----
Sepsis	10	10.0	30.2	-----	20.0	39.4	-----	40.0	45.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	1.9	-----	0.0	4.4	-----	0.0	6.7	-----
Carotid Endarterectomy	1	0.0	1.2	-----	0.0	2.3	-----	0.0	3.6	-----
Hip Replacement/Reconstruction	21	4.8	5.8	-----	4.8	10.8	-----	4.8	14.2	-----
Open Reduction of Hip Fracture	13	0.0	4.9	-----	7.7	9.0	-----	7.7	12.0	-----
Prostatectomy	18	0.0	1.4	-----	0.0	3.2	-----	0.0	5.4	-----
Cholecystectomy	23	0.0	2.3	-----	4.3	3.5	-----	4.3	4.4	-----
Hysterectomy	3	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LOUDOUN HOSPITAL CENTER
Medicare Provider Number: 490043

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	59.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	13.9 %
Admitted for emergency	40.6 %

COMORBIDITIES:

Cancer	8.1 %
Chronic cardiovascular disease	32.7 %
Chronic liver disease	1.0 %
Chronic renal disease	1.3 %
Chronic pulmonary disease	14.3 %
Cerebrovascular degeneration	8.0 %
Diabetes mellitus	6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	78.6%
State	12.8%
Outside State	8.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	219
Occupancy Rate	73.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.5 %
Case Mix Index (CMI)	1.1774

STAFFING:

Total Number of Physicians	171
Percent of Physicians Board Certified Specialists	74.9 %
Medical Residents/Interns	0
Registered Nurses	82
Licensed Practical Nurses	24

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

LOUISE OBICI MEMORIAL HOSPITAL

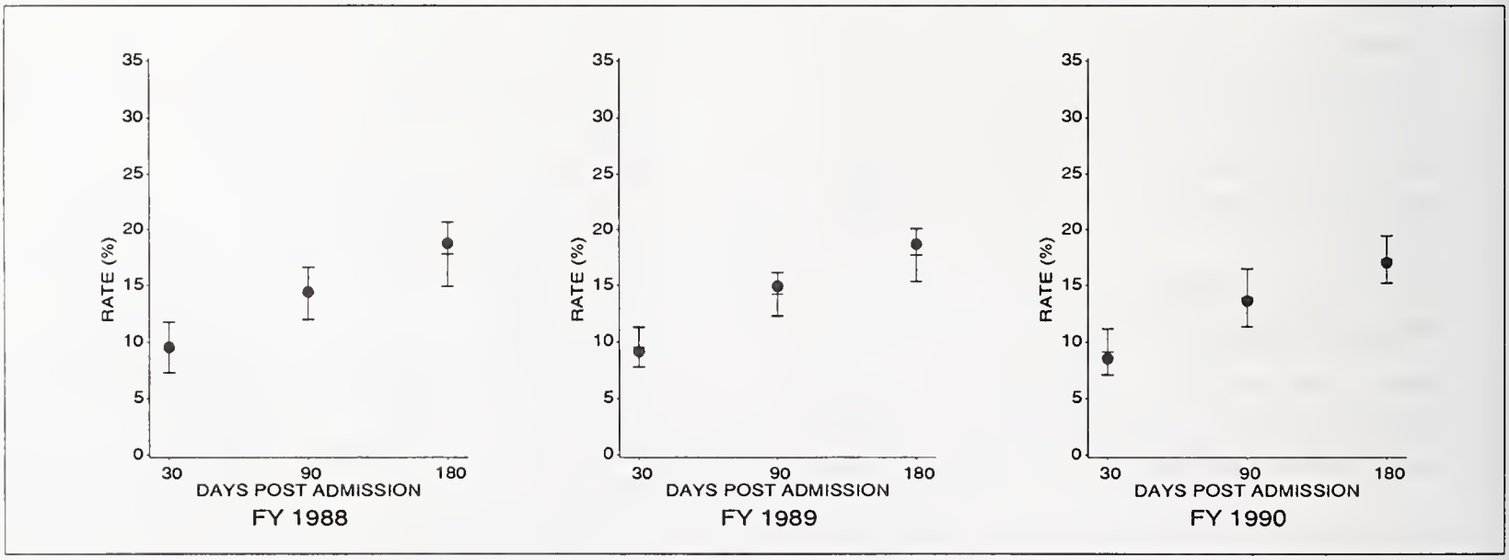
P O BOX 1100
SUFFOLK, VA 23434
Medicare Provider Number: 490044

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1836	8.5	9.1	1.0	13.6	13.9	1.3	17.0	17.3	1.1
CONDITIONS:										
Acute Myocardial Infarction	44	13.6	22.0	-----	22.7	25.0	-----	22.7	27.7	-----
Congestive Heart Failure	87	8.0	12.6	5.0	14.9	20.4	6.4	19.5	26.2	7.7
Pneumonia/Influenza	97	11.3	15.6	6.6	16.5	21.3	7.4	18.6	25.2	7.6
Chronic Obstructive Pulmonary Disease	23	4.3	5.3	-----	13.0	9.7	-----	17.4	13.3	-----
Transient Cerebral Ischemia	23	0.0	1.6	-----	4.3	3.6	-----	4.3	5.9	-----
Stroke	83	21.7	17.3	5.6	27.7	22.9	5.6	28.9	26.5	5.1
Hip Fracture	42	7.1	5.0	-----	11.9	9.3	-----	19.0	12.5	-----
Sepsis	19	21.1	23.1	-----	21.1	31.0	-----	26.3	36.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	12	0.0	3.2	-----	0.0	6.3	-----	8.3	9.1	-----
Carotid Endarterectomy	7	0.0	0.8	-----	0.0	1.6	-----	0.0	2.6	-----
Hip Replacement/Reconstruction	26	11.5	3.9	-----	11.5	7.5	-----	19.2	10.3	-----
Open Reduction of Hip Fracture	22	0.0	3.9	-----	9.1	7.5	-----	9.1	10.2	-----
Prostatectomy	35	2.9	1.1	-----	5.7	2.5	-----	5.7	4.1	-----
Cholecystectomy	48	2.1	2.6	-----	4.2	4.8	-----	8.3	6.5	-----
Hysterectomy	15	0.0	0.6	-----	0.0	1.2	-----	6.7	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LOUISE OBICI MEMORIAL HOSPITAL

Medicare Provider Number: 490044

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.7 years
Proportion female	57.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	9.0 %
Admitted for emergency	59.5 %

COMORBIDITIES:

Cancer	7.5 %
Chronic cardiovascular disease	29.3 %
Chronic liver disease	1.0 %
Chronic renal disease	4.4 %
Chronic pulmonary disease	16.3 %
Cerebrovascular degeneration	8.0 %
Diabetes mellitus	10.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.2%
State	28.4%
Outside State	6.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	184
Occupancy Rate	70.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.5 %
Case Mix Index (CMI)	1.2572

STAFFING:

Total Number of Physicians	90
Percent of Physicians Board Certified Specialists	77.8 %
Medical Residents/Interns	5
Registered Nurses	119
Licensed Practical Nurses	71

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

LYNCHBURG GENERAL HOSPITAL

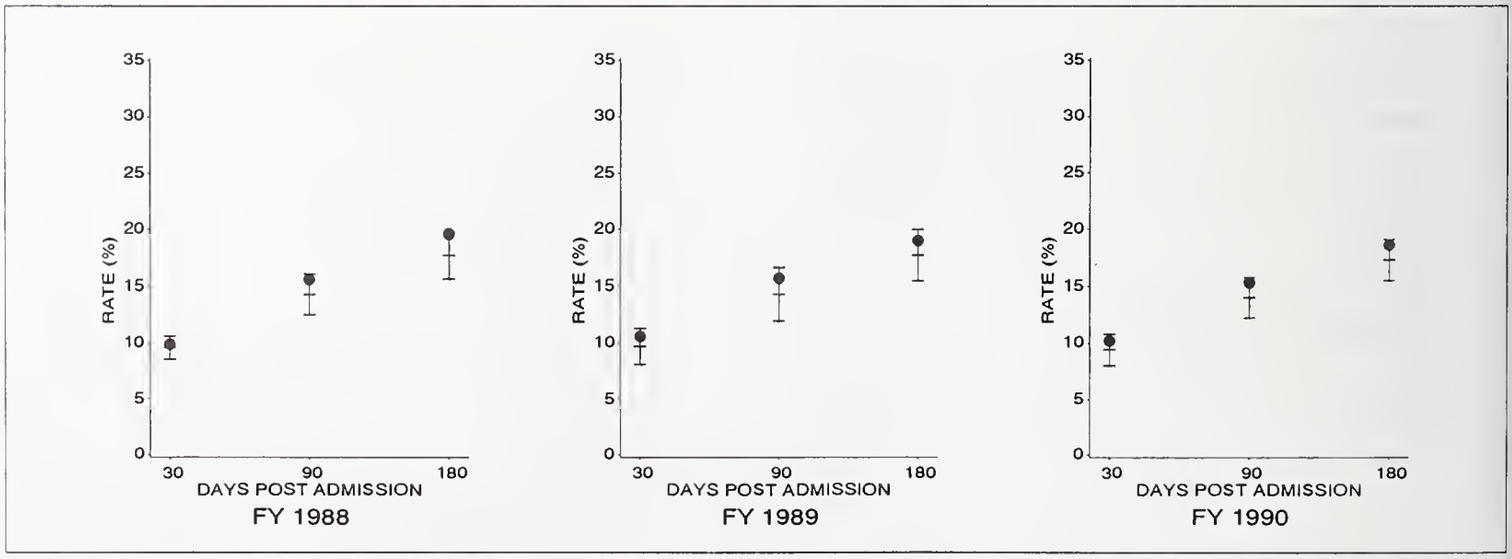
TATE SPRINGS RD, BOX 897
LYNCHBURG, VA 24506
Medicare Provider Number: 490095

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	3539	10.2	9.4	0.7	15.3	14.0	0.9	18.6	17.3	0.9
CONDITIONS:										
Acute Myocardial Infarction	130	27.7	24.4	4.0	30.8	27.3	4.2	30.8	30.0	4.1
Congestive Heart Failure	198	13.6	13.5	2.4	20.7	21.3	3.4	29.3	27.4	3.5
Pneumonia/Influenza	160	16.2	15.4	3.9	23.1	21.1	5.4	26.9	25.0	6.2
Chronic Obstructive Pulmonary Disease	68	2.9	8.7	6.4	10.3	15.2	7.2	16.2	19.9	6.4
Transient Cerebral Ischemia	35	2.9	1.7	-----	5.7	3.9	-----	11.4	6.5	-----
Stroke	173	26.6	21.7	5.7	34.1	27.2	6.3	35.8	30.6	6.5
Hip Fracture	138	6.5	6.4	2.9	12.3	11.2	3.1	16.7	14.6	3.9
Sepsis	38	26.3	27.2	-----	31.6	32.9	-----	31.6	36.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	16	0.0	4.4	-----	0.0	7.8	-----	6.3	10.8	-----
Carotid Endarterectomy	6	0.0	0.9	-----	0.0	1.8	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	105	2.9	2.9	1.7	6.7	5.4	2.5	10.5	7.4	3.6
Open Reduction of Hip Fracture	70	7.1	6.8	3.4	11.4	12.3	4.2	14.3	16.0	4.7
Prostatectomy	110	1.8	0.9	1.1	4.5	2.1	2.1	6.4	3.8	3.1
Cholecystectomy	53	3.8	3.5	2.5	9.4	6.2	3.8	13.2	8.0	4.9
Hysterectomy	5	0.0	0.4	-----	0.0	0.9	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LYNCHBURG GENERAL HOSPITAL
Medicare Provider Number: 490095

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	56.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	29.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	15.9 %
Admitted for emergency	69.7 %

COMORBIDITIES:

Cancer	6.9 %
Chronic cardiovascular disease	29.1 %
Chronic liver disease	0.7 %
Chronic renal disease	5.1 %
Chronic pulmonary disease	14.6 %
Cerebrovascular degeneration	4.8 %
Diabetes mellitus	8.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	42.0%
State	56.3%
Outside State	1.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	380
Occupancy Rate	76.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	52.4 %
Case Mix Index (CMI)	1.2773

STAFFING:

Total Number of Physicians	173
Percent of Physicians Board Certified Specialists	89.0 %
Medical Residents/Interns	0
Registered Nurses	208
Licensed Practical Nurses	60

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MARTHA JEFFERSON HOSPITAL

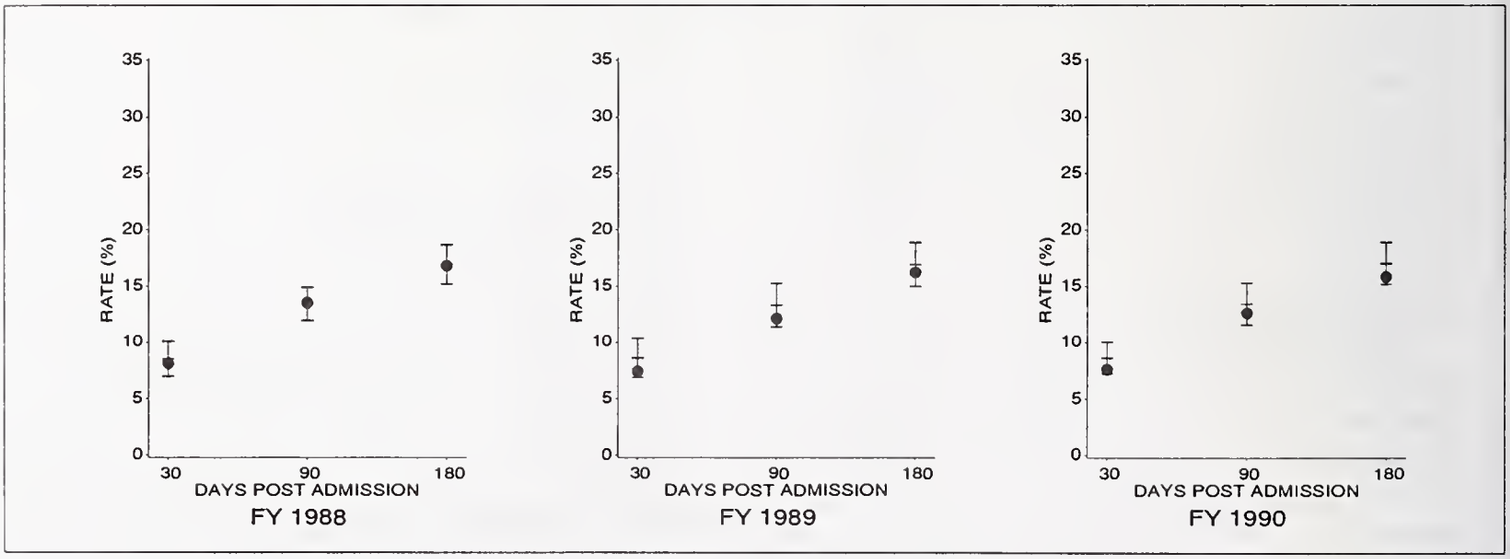
459 LOCUST AVE
CHARLOTTESVILLE, VA 22901
Medicare Provider Number: 490077

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2448	7.6	8.6	0.7	12.6	13.4	0.9	15.8	17.0	0.9
CONDITIONS:										
Acute Myocardial Infarction	86	17.4	33.4	7.2	23.3	36.5	7.2	27.9	39.2	6.5
Congestive Heart Failure	135	12.6	14.0	3.5	18.5	22.1	6.0	22.2	28.3	6.8
Pneumonia/Influenza	171	9.4	13.5	3.6	15.8	18.9	5.0	18.7	22.8	5.6
Chronic Obstructive Pulmonary Disease	34	5.9	5.6	-----	5.9	10.6	-----	11.8	14.5	-----
Transient Cerebral Ischemia	33	0.0	1.7	-----	3.0	4.0	-----	12.1	6.5	-----
Stroke	105	10.5	17.1	5.4	18.1	22.8	5.5	19.0	26.5	6.1
Hip Fracture	65	3.1	5.2	3.3	3.1	9.5	5.2	4.6	12.6	6.2
Sepsis	25	40.0	26.4	-----	40.0	37.4	-----	52.0	43.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	22	0.0	4.7	-----	13.6	8.4	-----	18.2	11.6	-----
Carotid Endarterectomy	1	0.0	2.0	-----	0.0	3.9	-----	0.0	6.3	-----
Hip Replacement/Reconstruction	49	0.0	2.0	-----	2.0	4.0	-----	2.0	5.6	-----
Open Reduction of Hip Fracture	21	0.0	4.3	-----	0.0	8.1	-----	4.8	11.1	-----
Prostatectomy	71	0.0	0.7	1.8	2.8	1.7	2.8	5.6	2.9	4.2
Cholecystectomy	32	0.0	1.1	-----	0.0	2.0	-----	0.0	2.6	-----
Hysterectomy	15	0.0	0.1	-----	0.0	0.2	-----	0.0	0.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MARTHA JEFFERSON HOSPITAL
Medicare Provider Number: 490077

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	58.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.9 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	16.2 %
Admitted for emergency	26.2 %

COMORBIDITIES:

Cancer	8.8 %
Chronic cardiovascular disease	24.8 %
Chronic liver disease	0.6 %
Chronic renal disease	0.9 %
Chronic pulmonary disease	15.7 %
Cerebrovascular degeneration	4.9 %
Diabetes mellitus	7.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	33.1%
State	64.4%
Outside State	2.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	185
Occupancy Rate	62.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	45.2 %
Case Mix Index (CMI)	1.1948

STAFFING:

Total Number of Physicians	136
Percent of Physicians Board Certified Specialists	90.4 %
Medical Residents/Interns	0
Registered Nurses	161
Licensed Practical Nurses	78

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MARY IMMACULATE HOSPITAL

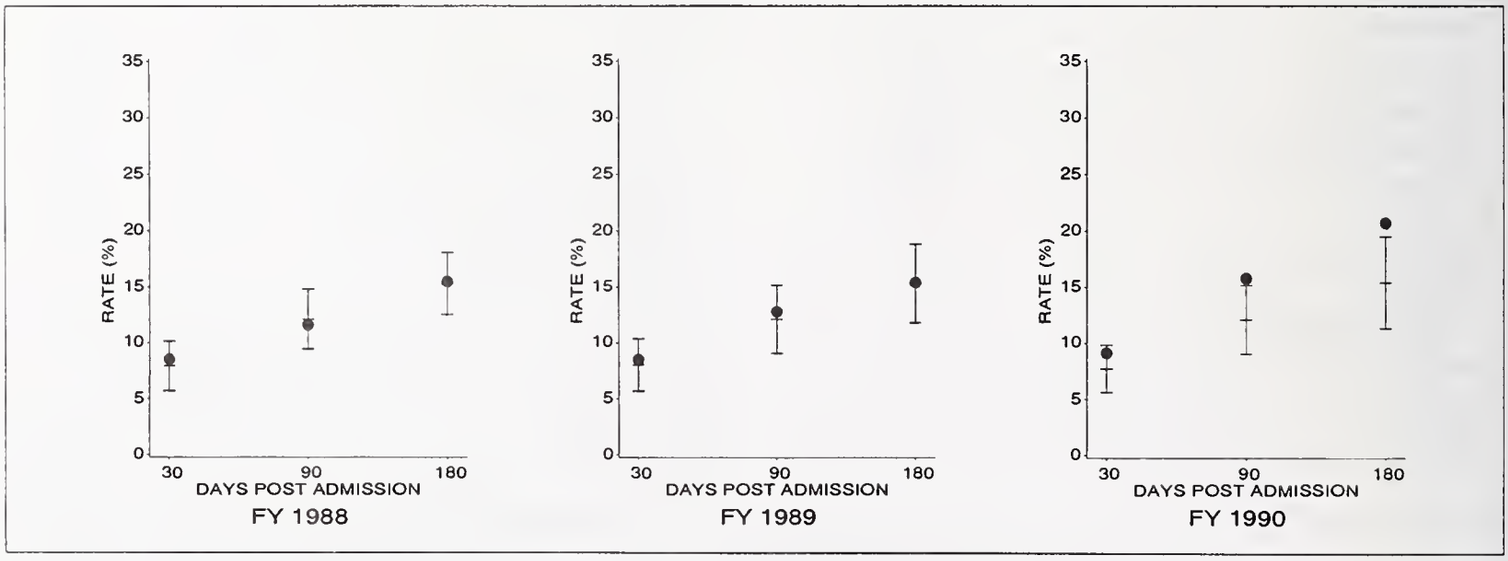
800 DENBIGH BLVD
NEWPORT NEWS, VA 23602
Medicare Provider Number: 490041

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	821	9.1	7.7	1.1	15.8	12.1	1.5	20.7	15.4	2.1
CONDITIONS:										
Acute Myocardial Infarction	16	18.8	25.6	-----	18.8	28.5	-----	18.8	31.3	-----
Congestive Heart Failure	43	7.0	11.8	-----	14.0	19.2	-----	18.6	24.9	-----
Pneumonia/Influenza	27	22.2	14.4	-----	33.3	20.5	-----	44.4	24.8	-----
Chronic Obstructive Pulmonary Disease	15	6.7	6.1	-----	20.0	10.2	-----	26.7	13.8	-----
Transient Cerebral Ischemia	21	0.0	1.4	-----	0.0	3.4	-----	4.8	5.5	-----
Stroke	25	16.0	14.8	-----	20.0	20.2	-----	24.0	23.2	-----
Hip Fracture	27	3.7	5.9	-----	7.4	10.6	-----	11.1	13.7	-----
Sepsis	8	50.0	32.8	-----	75.0	41.5	-----	75.0	47.2	-----
PROCEDURES:										
Angioplasty	1	0.0	10.5	-----	0.0	11.2	-----	0.0	11.8	-----
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	1.3	-----	0.0	3.0	-----	0.0	4.8	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	8	0.0	2.4	-----	12.5	4.6	-----	12.5	6.2	-----
Open Reduction of Hip Fracture	16	0.0	5.8	-----	0.0	10.3	-----	6.3	13.4	-----
Prostatectomy	19	0.0	0.5	-----	0.0	1.2	-----	0.0	2.2	-----
Cholecystectomy	8	0.0	1.7	-----	0.0	3.7	-----	0.0	5.7	-----
Hysterectomy	8	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MARY IMMACULATE HOSPITAL

Medicare Provider Number: 490041

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.6 years
Proportion female	63.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	56.3 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	46.9 %
Admitted for emergency	47.1 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	32.3 %
Chronic liver disease	0.7 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	12.1 %
Cerebrovascular degeneration	4.9 %
Diabetes mellitus	6.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	37.9%
State	56.2%
Outside State	5.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	225
Occupancy Rate	55.0 %
Ownership/Control	Church
Medicare Discharges	22.9 %
Case Mix Index (CMI)	1.1696

STAFFING:

Total Number of Physicians	197
Percent of Physicians Board Certified Specialists	85.3 %
Medical Residents/Interns	0
Registered Nurses	147
Licensed Practical Nurses	27

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

MARY WASHINGTON HOSPITAL

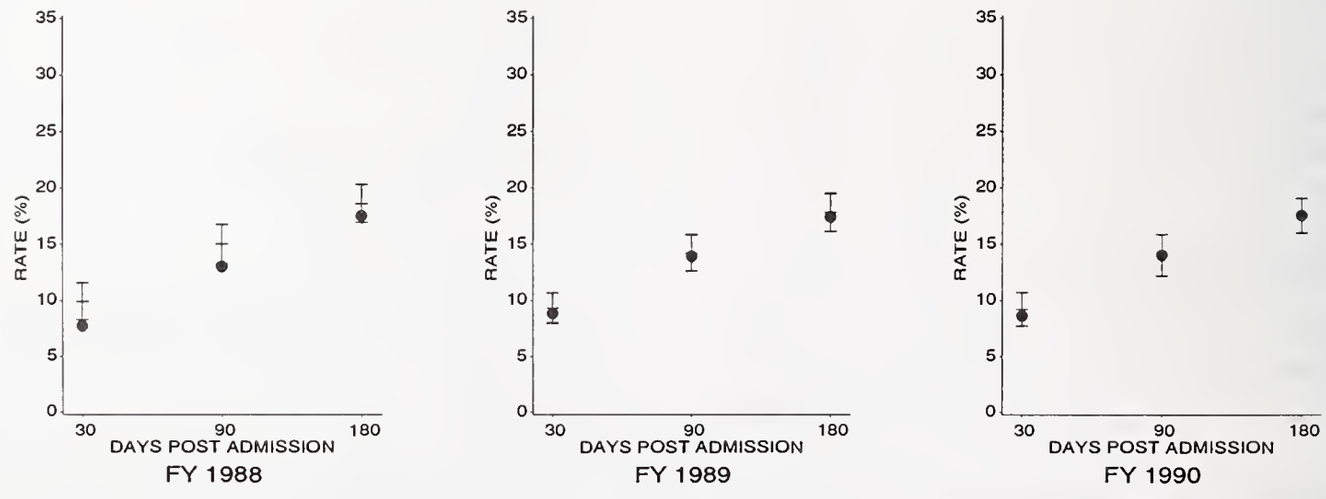
2300 FALL HILL AVE
FREDERICKSBURG, VA 22401
Medicare Provider Number: 490022

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3045	8.6	9.2	0.7	14.0	14.0	0.9	17.5	17.5	0.8
CONDITIONS:										
Acute Myocardial Infarction	75	21.3	28.1	7.9	26.7	31.2	9.1	28.0	33.8	8.5
Congestive Heart Failure	160	12.5	15.1	4.0	21.2	24.0	4.3	26.9	30.3	5.1
Pneumonia/Influenza	161	15.5	15.6	3.0	23.0	21.6	4.0	26.7	25.6	4.1
Chronic Obstructive Pulmonary Disease	46	4.3	8.8	-----	15.2	16.0	-----	21.7	21.2	-----
Transient Cerebral Ischemia	28	3.6	2.4	-----	7.1	5.6	-----	7.1	9.1	-----
Stroke	130	13.8	20.3	4.7	24.6	26.5	4.0	27.7	30.2	4.6
Hip Fracture	75	4.0	6.3	4.2	9.3	11.2	5.3	12.0	14.6	5.6
Sepsis	47	23.4	29.3	-----	34.0	37.0	-----	38.3	42.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	14	7.1	3.0	-----	14.3	5.9	-----	14.3	8.9	-----
Carotid Endarterectomy	21	0.0	1.1	-----	0.0	2.0	-----	0.0	3.0	-----
Hip Replacement/Reconstruction	46	0.0	3.1	-----	4.3	5.8	-----	4.3	7.7	-----
Open Reduction of Hip Fracture	29	0.0	5.0	-----	0.0	9.0	-----	0.0	12.0	-----
Prostatectomy	111	0.0	0.8	1.5	1.8	2.0	1.8	4.5	3.3	2.1
Cholecystectomy	58	5.2	2.5	3.0	5.2	4.5	2.8	5.2	6.0	3.2
Hysterectomy	11	0.0	0.7	-----	0.0	1.8	-----	0.0	3.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MARY WASHINGTON HOSPITAL
Medicare Provider Number: 490022

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.4 years
Proportion female	56.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	36.3 %
Transferred from skilled nursing facility	1.1 %
Admitted for elective procedure	18.3 %
Admitted for emergency	56.0 %

COMORBIDITIES:

Cancer	7.8 %
Chronic cardiovascular disease	27.0 %
Chronic liver disease	1.0 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	11.4 %
Cerebrovascular degeneration	8.2 %
Diabetes mellitus	6.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	32.8%
State	63.0%
Outside State	4.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.4 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	312
Occupancy Rate	77.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1828

STAFFING:

Total Number of Physicians	142
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	296
Licensed Practical Nurses	104

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

MARYVIEW HOSPITAL

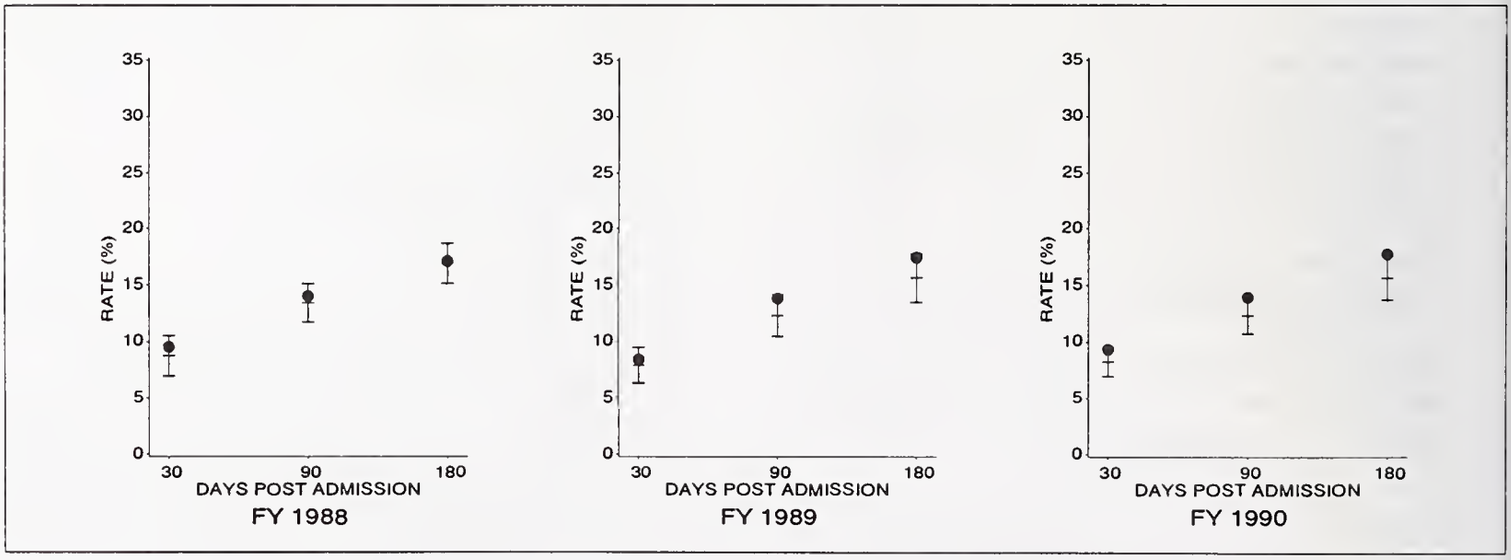
3636 HIGH STREET
PORTSMOUTH, VA 23707
Medicare Provider Number: 490017

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2446	9.3	8.2	0.6	13.9	12.3	0.8	17.7	15.6	1.0
CONDITIONS:										
Acute Myocardial Infarction	77	14.3	28.3	6.5	24.7	31.5	6.4	27.3	34.5	5.8
Congestive Heart Failure	131	13.7	14.0	4.2	17.6	22.3	5.9	23.7	28.4	5.9
Pneumonia/Influenza	94	16.0	14.4	3.8	22.3	19.8	4.4	29.8	23.5	5.9
Chronic Obstructive Pulmonary Disease	38	5.3	5.1	-----	7.9	9.2	-----	13.2	12.6	-----
Transient Cerebral Ischemia	38	2.6	1.8	-----	5.3	3.9	-----	7.9	6.2	-----
Stroke	101	18.8	19.3	6.2	26.7	25.1	7.9	31.7	28.6	7.0
Hip Fracture	56	5.4	5.7	4.9	14.3	10.3	6.4	19.6	13.6	8.6
Sepsis	26	30.8	22.8	-----	38.5	29.5	-----	38.5	33.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	22	0.0	3.0	-----	4.5	6.0	-----	4.5	8.8	-----
Carotid Endarterectomy	28	0.0	1.8	-----	0.0	3.3	-----	3.6	4.8	-----
Hip Replacement/Reconstruction	34	8.8	2.4	-----	14.7	4.8	-----	17.6	6.6	-----
Open Reduction of Hip Fracture	29	3.4	5.8	-----	13.8	10.8	-----	13.8	14.4	-----
Prostatectomy	69	0.0	0.7	1.5	1.4	1.5	2.2	2.9	2.6	3.4
Cholecystectomy	40	0.0	3.8	-----	5.0	6.5	-----	7.5	8.2	-----
Hysterectomy	28	0.0	0.2	-----	0.0	0.6	-----	3.6	0.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MARYVIEW HOSPITAL
Medicare Provider Number: 490017

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	58.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	47.4 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	37.7 %
Admitted for emergency	49.3 %

COMORBIDITIES:

Cancer	6.9 %
Chronic cardiovascular disease	29.1 %
Chronic liver disease	1.2 %
Chronic renal disease	3.0 %
Chronic pulmonary disease	14.1 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	69.1%
State	27.5%
Outside State	3.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	308
Occupancy Rate	65.0 %
Ownership/Control	Church
Medicare Discharges	42.0 %
Case Mix Index (CMI)	1.2606

STAFFING:

Total Number of Physicians	201
Percent of Physicians Board Certified Specialists	76.1 %
Medical Residents/Interns	0
Registered Nurses	325
Licensed Practical Nurses	36

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MEDICAL COLLEGE OF VIRGINIA HOSPITALS

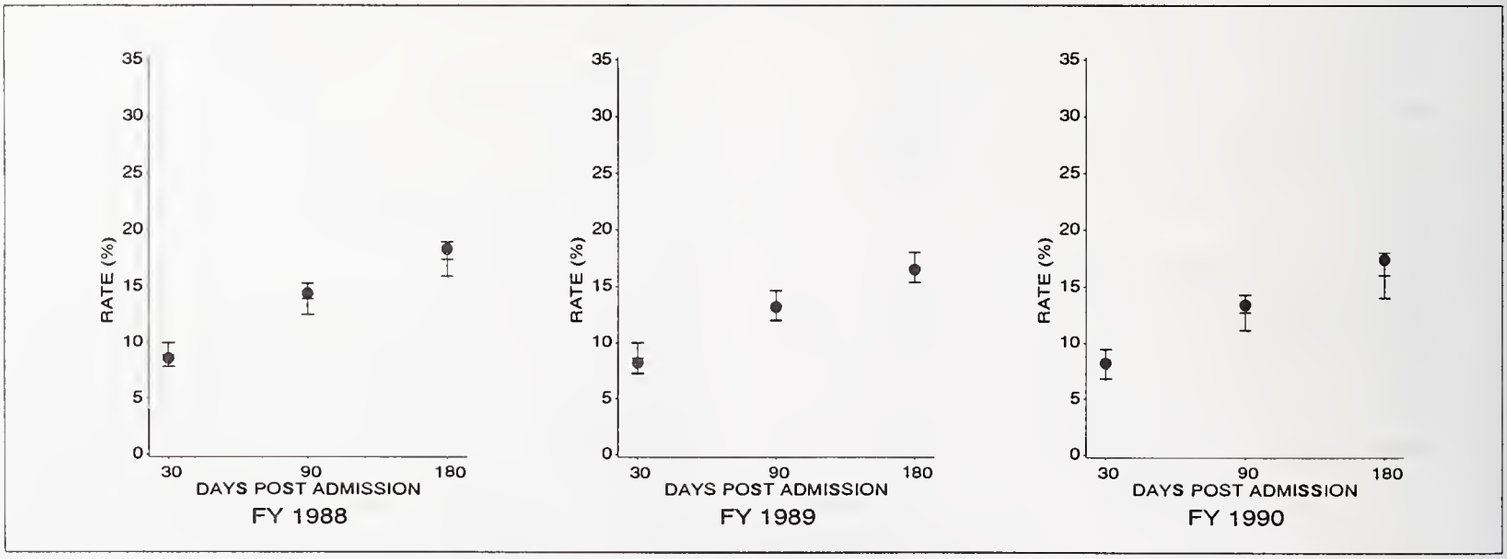
401 N 12TH ST, MCV STATION, BOX 510
RICHMOND, VA 23298
Medicare Provider Number: 490032

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	3145	8.2	8.1	0.7	13.4	12.7	0.8	17.4	16.0	1.0
CONDITIONS:										
Acute Myocardial Infarction	65	21.5	24.0	5.9	23.1	27.0	6.2	23.1	29.7	7.0
Congestive Heart Failure	126	9.5	12.9	4.9	17.5	20.9	4.7	24.6	26.6	4.4
Pneumonia/Influenza	64	17.2	14.0	5.1	20.3	19.1	5.5	25.0	22.5	6.0
Chronic Obstructive Pulmonary Disease	17	5.9	10.3	-----	23.5	17.8	-----	41.2	23.1	-----
Transient Cerebral Ischemia	42	0.0	1.9	-----	0.0	4.0	-----	0.0	6.1	-----
Stroke	94	22.3	20.4	4.5	25.5	25.7	4.6	29.8	28.8	5.0
Hip Fracture	26	11.5	6.3	-----	15.4	10.9	-----	19.2	13.8	-----
Sepsis	6	16.7	14.8	-----	16.7	20.9	-----	33.3	25.1	-----
PROCEDURES:										
Angioplasty	102	2.0	3.0	2.0	3.9	4.3	2.1	5.9	5.4	2.4
Coronary Artery Bypass Graft	110	8.2	6.3	2.5	15.5	9.6	3.9	18.2	11.1	4.5
Initial Pacemaker Insertion	9	11.1	3.3	-----	22.2	7.4	-----	22.2	11.2	-----
Carotid Endarterectomy	4	0.0	2.4	-----	0.0	4.9	-----	25.0	6.7	-----
Hip Replacement/Reconstruction	37	2.7	1.8	-----	5.4	3.3	-----	5.4	4.4	-----
Open Reduction of Hip Fracture	15	6.7	5.4	-----	6.7	9.6	-----	13.3	12.3	-----
Prostatectomy	26	0.0	0.9	-----	7.7	2.2	-----	7.7	3.8	-----
Cholecystectomy	17	0.0	5.8	-----	11.8	10.9	-----	17.6	14.0	-----
Hysterectomy	33	3.0	0.5	-----	3.0	1.2	-----	3.0	2.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEDICAL COLLEGE OF VIRGINIA HOSPITALS

Medicare Provider Number: 490032

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	66.7 years
Proportion female	50.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.1 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	30.8 %
Admitted for emergency	48.4 %

COMORBIDITIES:

Cancer	8.5 %
Chronic cardiovascular disease	28.6 %
Chronic liver disease	1.0 %
Chronic renal disease	7.5 %
Chronic pulmonary disease	7.3 %
Cerebrovascular degeneration	4.0 %
Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	39.4%
State	56.4%
Outside State	4.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	909
Occupancy Rate	77.0 %
Ownership/Control	State Government
Medicare Discharges	18.2 %
Case Mix Index (CMI)	1.5489

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	462
Registered Nurses	1034
Licensed Practical Nurses	285

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MEMORIAL HOSPITAL

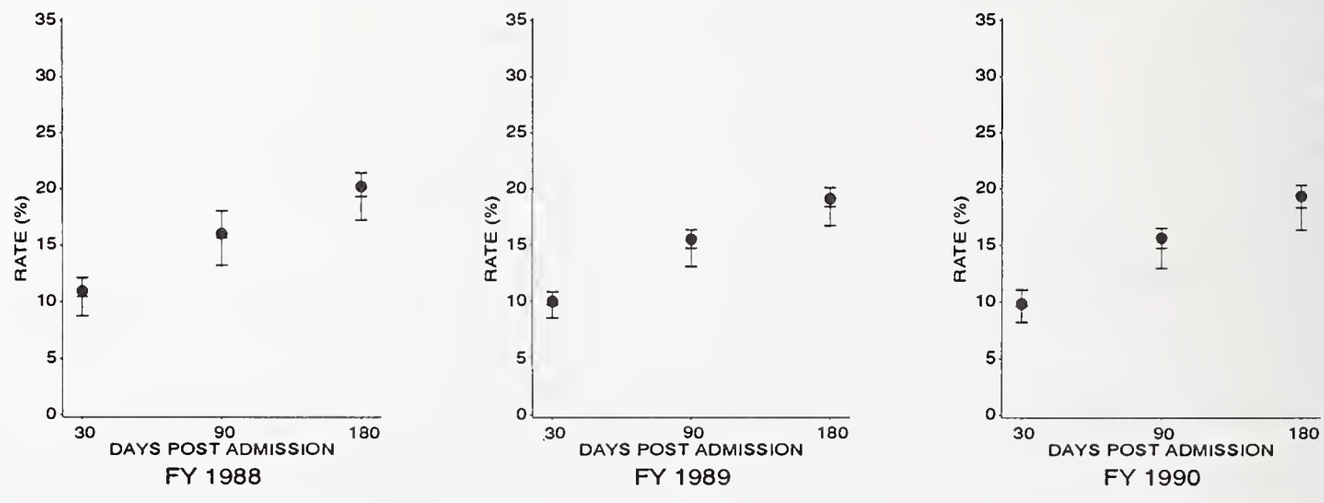
142 S MAIN ST
DANVILLE, VA 24541
Medicare Provider Number: 490075

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3562	9.8	9.6	0.7	15.6	14.7	0.9	19.3	18.3	1.0
CONDITIONS:										
Acute Myocardial Infarction	147	17.0	24.7	5.5	19.7	27.8	6.0	22.4	30.5	6.1
Congestive Heart Failure	190	14.2	13.3	2.8	25.8	21.4	4.9	30.5	27.3	4.6
Pneumonia/Influenza	152	20.4	18.6	4.2	27.6	25.8	3.9	30.3	30.0	3.8
Chronic Obstructive Pulmonary Disease	14	14.3	12.4	-----	21.4	20.1	-----	28.6	25.8	-----
Transient Cerebral Ischemia	59	6.8	2.1	4.3	10.2	4.5	5.5	11.9	7.0	6.0
Stroke	140	18.6	19.6	3.5	28.6	26.5	4.2	31.4	30.5	4.9
Hip Fracture	123	9.8	7.1	3.1	14.6	12.5	3.4	16.3	16.3	3.3
Sepsis	48	37.5	25.2	-----	41.7	34.8	-----	41.7	39.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	22	4.5	2.8	-----	4.5	5.7	-----	9.1	8.4	-----
Carotid Endarterectomy	4	0.0	1.9	-----	0.0	3.5	-----	0.0	5.4	-----
Hip Replacement/Reconstruction	41	12.2	5.2	-----	19.5	9.7	-----	22.0	12.8	-----
Open Reduction of Hip Fracture	81	6.2	6.7	2.8	11.1	12.3	3.9	12.3	16.4	4.9
Prostatectomy	92	0.0	0.9	1.5	0.0	2.1	3.1	4.3	3.6	2.4
Cholecystectomy	85	10.6	2.8	5.3	11.8	5.6	4.2	12.9	7.8	4.0
Hysterectomy	33	0.0	0.1	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEMORIAL HOSPITAL
Medicare Provider Number: 490075

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.8 years
Proportion female	55.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	36.3 %
Transferred from skilled nursing facility	5.3 %
Admitted for elective procedure	14.0 %
Admitted for emergency	71.8 %

COMORBIDITIES:

Cancer	8.2 %
Chronic cardiovascular disease	36.1 %
Chronic liver disease	0.9 %
Chronic renal disease	6.9 %
Chronic pulmonary disease	17.3 %
Cerebrovascular degeneration	6.4 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	52.4%
State	37.3%
Outside State	10.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	391
Occupancy Rate	73.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	44.7 %
Case Mix Index (CMI)	1.1986

STAFFING:

Total Number of Physicians	98
Percent of Physicians Board Certified Specialists	76.5 %
Medical Residents/Interns	0
Registered Nurses	259
Licensed Practical Nurses	147

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

MEMORIAL HOSPITAL MARTINSVILLE

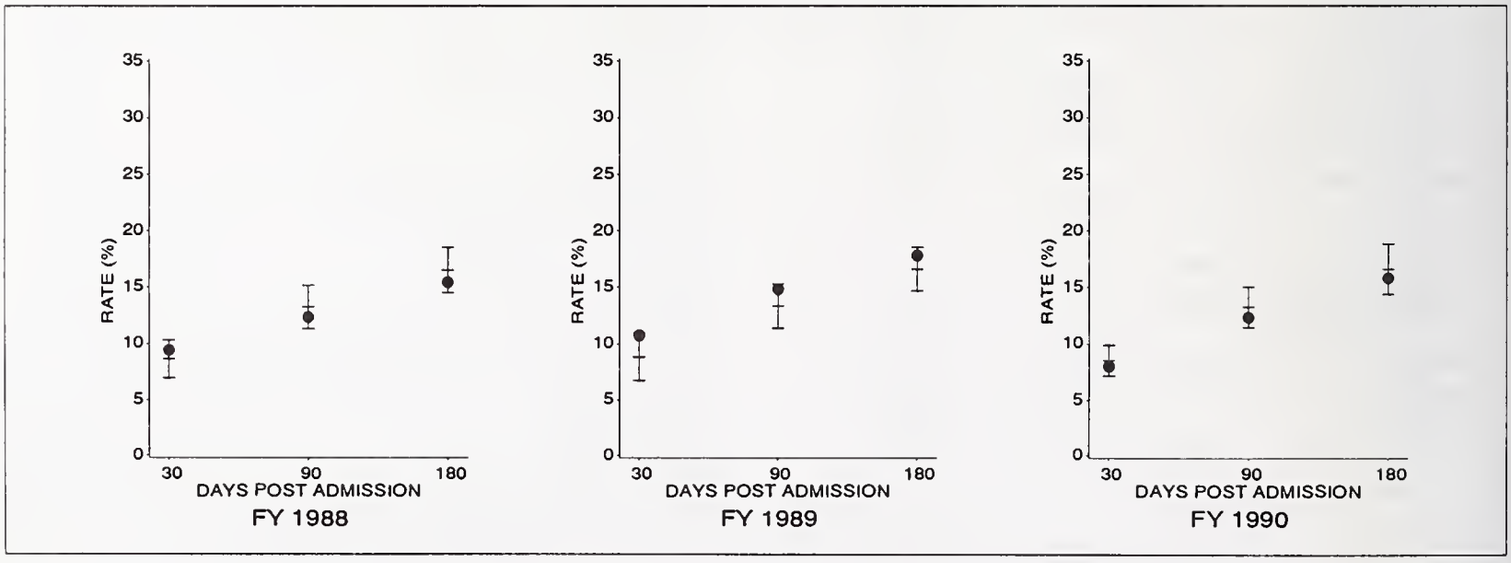
PO BOX 4788
MARTINSVILLE, VA 24112
Medicare Provider Number: 490079

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2076	8.0	8.5	0.7	12.3	13.2	0.9	15.8	16.6	1.1
CONDITIONS:										
Acute Myocardial Infarction	44	34.1	24.8	-----	34.1	28.0	-----	36.4	30.6	-----
Congestive Heart Failure	126	11.9	14.1	3.8	19.8	22.4	4.3	30.2	28.4	4.9
Pneumonia/Influenza	105	14.3	17.0	4.4	21.0	23.3	4.3	25.7	27.2	4.6
Chronic Obstructive Pulmonary Disease	34	11.8	9.0	-----	20.6	16.0	-----	23.5	20.9	-----
Transient Cerebral Ischemia	40	2.5	2.0	-----	7.5	4.6	-----	12.5	7.4	-----
Stroke	85	14.1	17.2	4.5	18.8	23.9	5.6	20.0	27.5	6.3
Hip Fracture	56	0.0	7.0	5.4	7.1	12.0	6.4	7.1	15.2	6.9
Sepsis	27	11.1	16.7	-----	11.1	23.2	-----	11.1	27.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	6	0.0	2.2	-----	0.0	4.5	-----	0.0	6.6	-----
Carotid Endarterectomy	1	0.0	3.5	-----	0.0	5.4	-----	0.0	7.1	-----
Hip Replacement/Reconstruction	30	0.0	2.9	-----	3.3	5.2	-----	3.3	6.9	-----
Open Reduction of Hip Fracture	40	0.0	6.0	-----	7.5	10.7	-----	7.5	13.8	-----
Prostatectomy	87	0.0	0.9	1.9	3.4	2.1	2.1	4.6	3.6	2.6
Cholecystectomy	45	2.2	2.8	-----	2.2	5.0	-----	2.2	6.3	-----
Hysterectomy	22	0.0	0.7	-----	0.0	1.5	-----	0.0	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEMORIAL HOSPITAL MARTINSVILLE
Medicare Provider Number: 490079

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	56.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	10.8 %
Admitted for emergency	59.4 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	35.3 %
Chronic liver disease	1.2 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	15.8 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	11.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	35.8%
State	62.4%
Outside State	1.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	187
Occupancy Rate	73.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.6 %
Case Mix Index (CMI)	1.2050

STAFFING:

Total Number of Physicians	75
Percent of Physicians Board Certified Specialists	76.0 %
Medical Residents/Interns	0
Registered Nurses	147
Licensed Practical Nurses	97

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

METROPOLITAN HOSPITAL

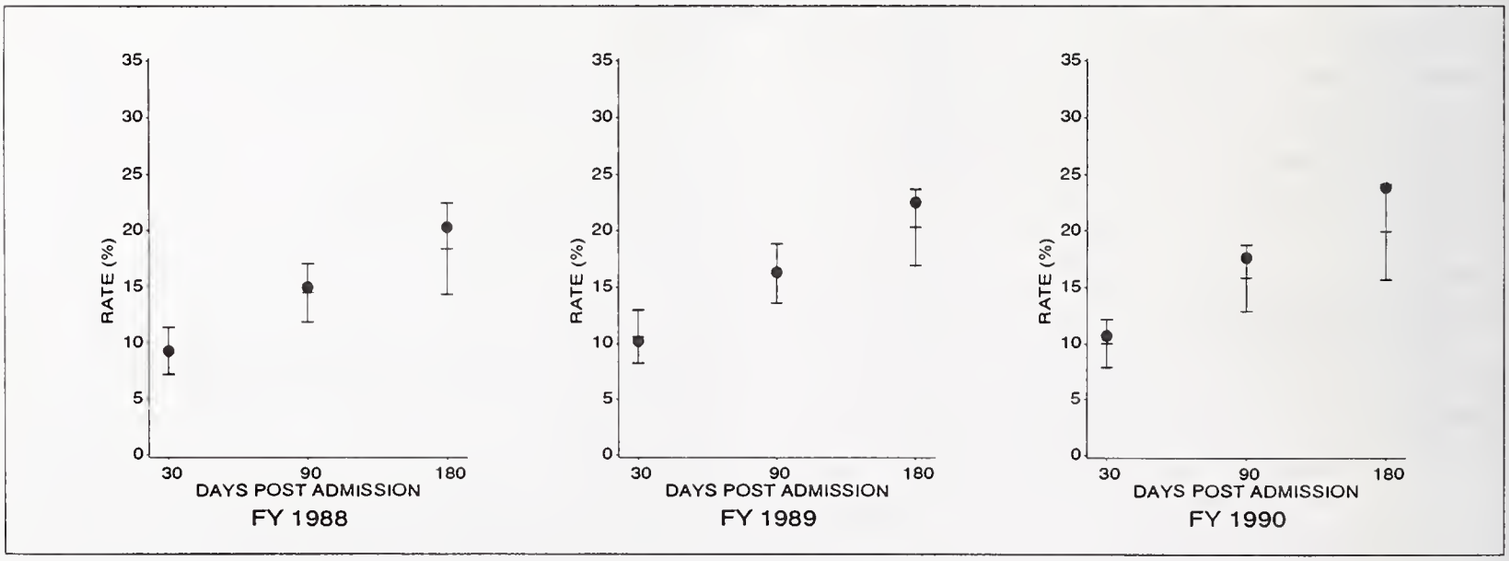
700 WEST GRACE ST
RICHMOND, VA 23220
Medicare Provider Number: 490124

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	825	10.7	10.0	1.1	17.6	15.8	1.5	23.8	19.9	2.1
CONDITIONS:										
Acute Myocardial Infarction	10	30.0	22.1	-----	40.0	27.3	-----	40.0	30.6	-----
Congestive Heart Failure	40	5.0	15.7	-----	20.0	25.4	-----	35.0	31.8	-----
Pneumonia/Influenza	34	20.6	13.8	-----	23.5	19.3	-----	32.4	23.5	-----
Chronic Obstructive Pulmonary Disease	9	11.1	10.7	-----	11.1	17.3	-----	22.2	22.7	-----
Transient Cerebral Ischemia	15	6.7	2.0	-----	6.7	4.7	-----	6.7	7.6	-----
Stroke	26	7.7	18.4	-----	11.5	24.3	-----	19.2	28.0	-----
Hip Fracture	8	0.0	5.4	-----	0.0	9.2	-----	12.5	12.0	-----
Sepsis	37	18.9	21.6	-----	29.7	27.2	-----	37.8	31.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	4	0.0	8.3	-----	0.0	14.3	-----	0.0	18.0	-----
Carotid Endarterectomy	3	33.3	2.1	-----	33.3	3.6	-----	33.3	5.3	-----
Hip Replacement/Reconstruction	6	0.0	1.9	-----	0.0	3.6	-----	0.0	5.1	-----
Open Reduction of Hip Fracture	3	0.0	4.5	-----	0.0	7.4	-----	33.3	10.0	-----
Prostatectomy	12	8.3	2.2	-----	16.7	5.6	-----	16.7	9.6	-----
Cholecystectomy	6	0.0	1.8	-----	0.0	4.1	-----	16.7	6.7	-----
Hysterectomy	5	0.0	0.3	-----	0.0	0.5	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



METROPOLITAN HOSPITAL
Medicare Provider Number: 490124

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	62.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	36.6 %
Transferred from skilled nursing facility	0.6 %
Admitted for elective procedure	31.0 %
Admitted for emergency	4.7 %

COMORBIDITIES:

Cancer	6.4 %
Chronic cardiovascular disease	31.8 %
Chronic liver disease	1.2 %
Chronic renal disease	5.6 %
Chronic pulmonary disease	12.1 %
Cerebrovascular degeneration	10.4 %
Diabetes mellitus	8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	63.4%
State	35.3%
Outside State	1.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	180
Occupancy Rate	55.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	50.4 %
Case Mix Index (CMI)	1.2689

STAFFING:

Total Number of Physicians	110
Percent of Physicians Board Certified Specialists	74.5 %
Medical Residents/Interns	10
Registered Nurses	86
Licensed Practical Nurses	36

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

MONTGOMERY REGIONAL HOSPITAL

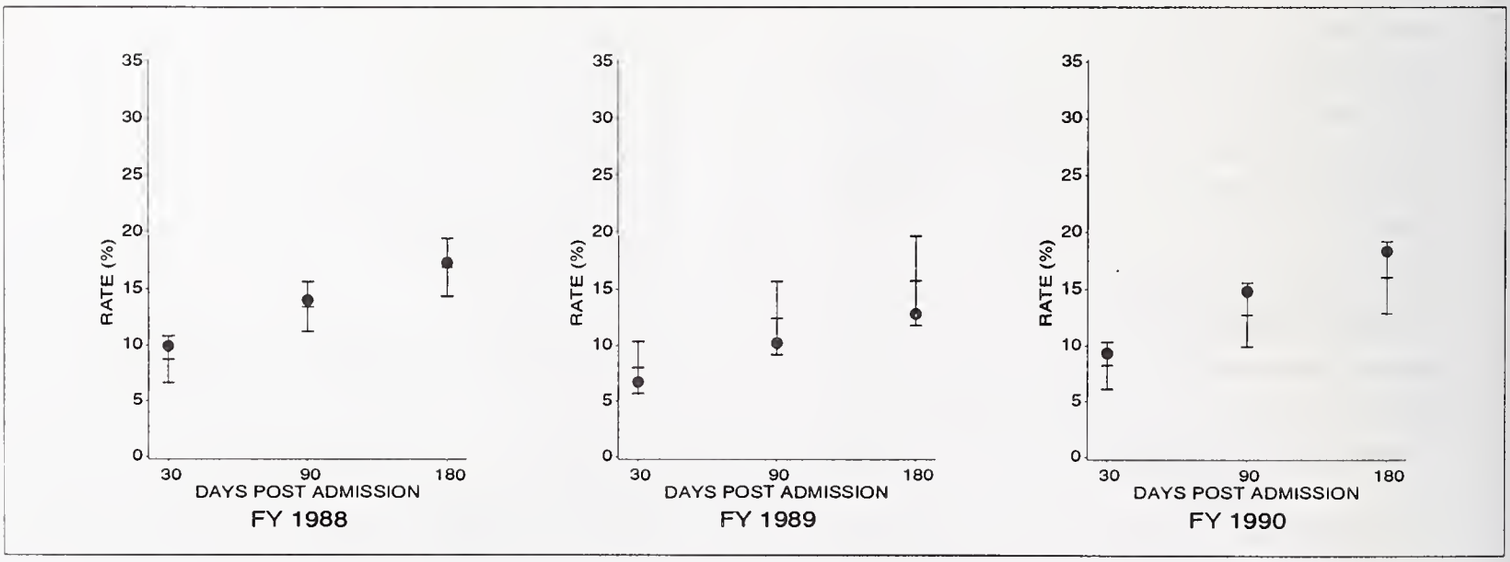
ROUTE 460 SOUTH
BLACKSBURG, VA 24060
Medicare Provider Number: 490110

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1029	9.3	8.2	1.1	14.8	12.7	1.4	18.3	16.0	1.6
CONDITIONS:										
Acute Myocardial Infarction	28	46.4	24.0	-----	57.1	26.5	-----	60.7	29.0	-----
Congestive Heart Failure	55	7.3	14.3	8.6	16.4	22.8	9.6	23.6	29.2	8.6
Pneumonia/Influenza	54	14.8	15.3	4.9	20.4	21.2	6.6	25.9	25.2	6.8
Chronic Obstructive Pulmonary Disease	30	0.0	7.6	-----	6.7	13.6	-----	10.0	18.2	-----
Transient Cerebral Ischemia	19	0.0	3.9	-----	5.3	8.6	-----	5.3	13.2	-----
Stroke	44	29.5	18.6	-----	43.2	25.2	-----	50.0	29.3	-----
Hip Fracture	37	8.1	7.4	-----	8.1	12.7	-----	16.2	16.4	-----
Sepsis	5	40.0	22.9	-----	40.0	31.7	-----	40.0	35.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	12	0.0	3.4	-----	0.0	7.1	-----	8.3	10.7	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	26	11.5	3.8	-----	11.5	6.9	-----	19.2	9.3	-----
Open Reduction of Hip Fracture	20	0.0	6.1	-----	0.0	10.9	-----	5.0	14.3	-----
Prostatectomy	14	0.0	0.8	-----	0.0	1.7	-----	7.1	2.9	-----
Cholecystectomy	27	3.7	2.1	-----	7.4	4.2	-----	7.4	5.9	-----
Hysterectomy	11	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MONTGOMERY REGIONAL HOSPITAL

Medicare Provider Number: 490110

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	61.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	44.2 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	12.7 %
Admitted for emergency	0.1 %

COMORBIDITIES:

Cancer	5.5 %
Chronic cardiovascular disease	41.8 %
Chronic liver disease	0.5 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	23.9 %
Cerebrovascular degeneration	1.9 %
Diabetes mellitus	11.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	74.4%
State	22.7%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	115
Occupancy Rate	53.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	39.1 %
Case Mix Index (CMI)	1.1069

STAFFING:

Total Number of Physicians	48
Percent of Physicians Board Certified Specialists	93.8 %
Medical Residents/Interns	0
Registered Nurses	79
Licensed Practical Nurses	34

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

MT VERNON HOSPITAL

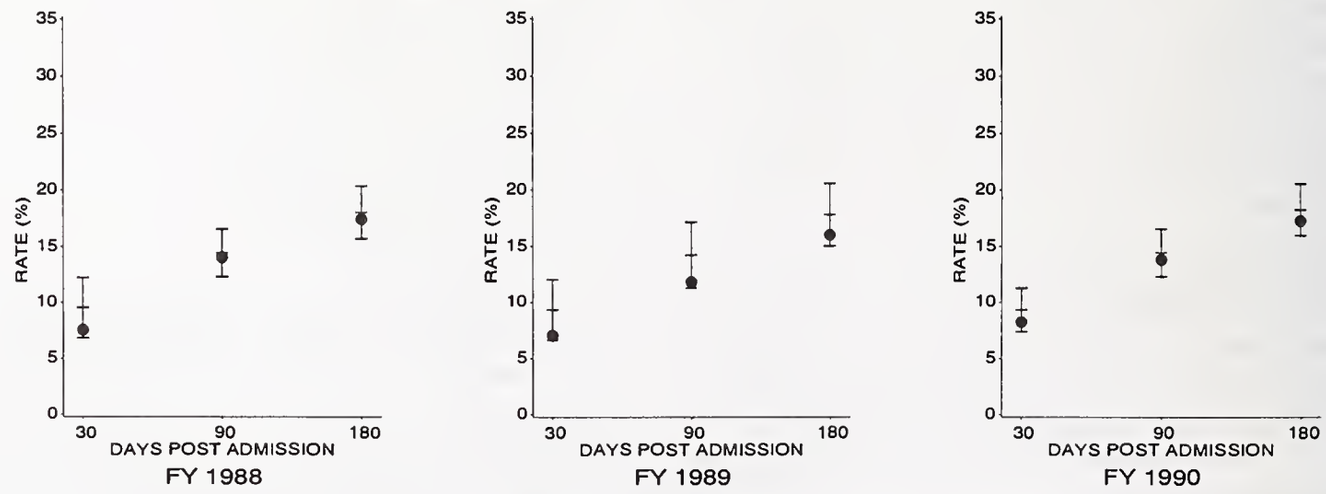
2501 PARKERS LANE
ALEXANDRIA, VA 22306
Medicare Provider Number: 490122

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1350	8.2	9.3	1.0	13.8	14.4	1.1	17.2	18.2	1.1
CONDITIONS:										
Acute Myocardial Infarction	29	27.6	24.9	-----	34.5	28.7	-----	41.4	31.5	-----
Congestive Heart Failure	82	12.2	12.8	3.8	22.0	20.3	5.5	30.5	26.3	7.3
Pneumonia/Influenza	71	8.5	18.6	6.9	14.1	25.5	8.4	18.3	29.8	8.3
Chronic Obstructive Pulmonary Disease	28	3.6	7.1	-----	10.7	12.7	-----	10.7	16.8	-----
Transient Cerebral Ischemia	24	0.0	2.1	-----	4.2	5.0	-----	4.2	8.6	-----
Stroke	59	20.3	20.9	5.7	30.5	26.8	6.5	35.6	30.2	6.5
Hip Fracture	44	6.8	5.6	-----	6.8	10.0	-----	9.1	13.1	-----
Sepsis	28	14.3	22.9	-----	17.9	30.8	-----	21.4	35.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	4	0.0	1.4	-----	0.0	3.0	-----	0.0	4.7	-----
Carotid Endarterectomy	2	0.0	1.8	-----	0.0	3.4	-----	0.0	4.5	-----
Hip Replacement/Reconstruction	24	4.2	3.3	-----	4.2	6.3	-----	8.3	8.4	-----
Open Reduction of Hip Fracture	23	8.7	5.7	-----	8.7	10.4	-----	13.0	13.7	-----
Prostatectomy	21	4.8	0.9	-----	4.8	2.1	-----	4.8	3.4	-----
Cholecystectomy	35	2.9	2.3	-----	2.9	4.1	-----	2.9	5.4	-----
Hysterectomy	8	0.0	0.7	-----	0.0	1.7	-----	0.0	2.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MT VERNON HOSPITAL
Medicare Provider Number: 490122

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.1 years
Proportion female	60.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	12.7 %
Admitted for emergency	62.9 %

COMORBIDITIES:

Cancer	7.6 %
Chronic cardiovascular disease	35.8 %
Chronic liver disease	0.8 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	14.7 %
Cerebrovascular degeneration	5.6 %
Diabetes mellitus	7.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	63.1%
State	26.3%
Outside State	10.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	211
Occupancy Rate	71.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.5 %
Case Mix Index (CMI)	1.1786

STAFFING:

Total Number of Physicians	193
Percent of Physicians Board Certified Specialists	79.8 %
Medical Residents/Interns	0
Registered Nurses	234
Licensed Practical Nurses	1

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

NATIONAL ORTHO & REHAB HOSPITAL

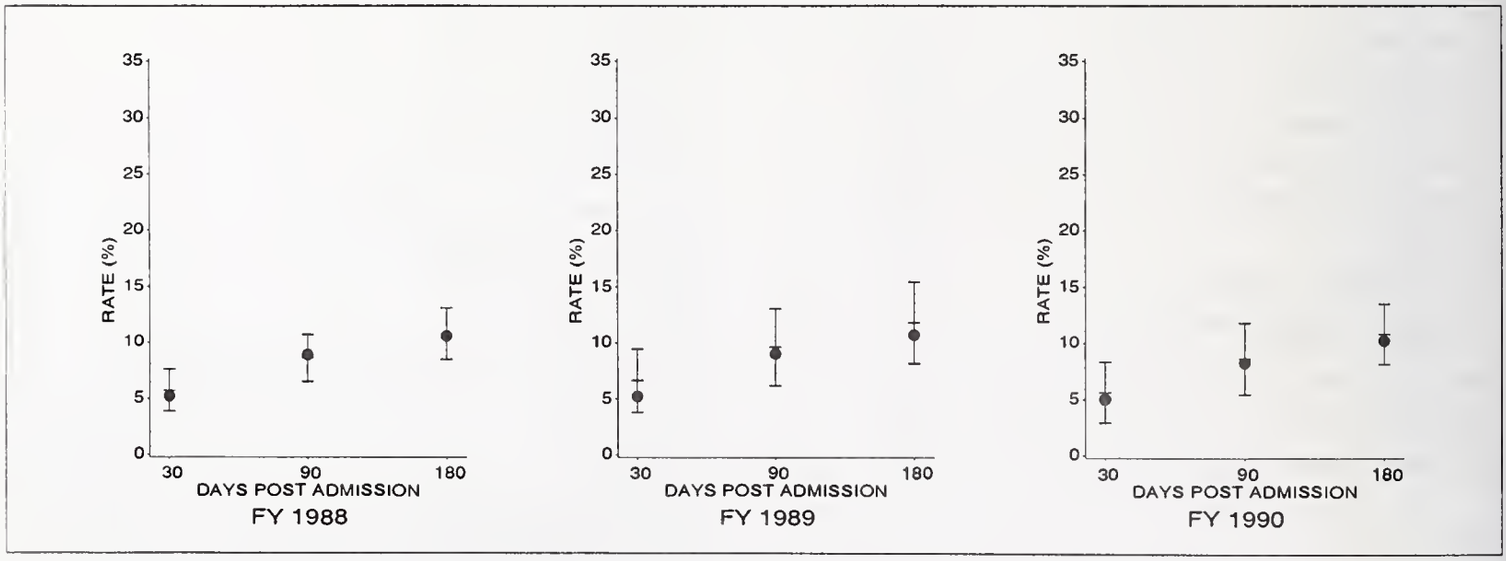
2455 ARMY-NAVY DR
ARLINGTON, VA 22206
Medicare Provider Number: 490014

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	822	5.0	5.6	1.4	8.2	8.6	1.6	10.2	10.8	1.4
CONDITIONS:										
Acute Myocardial Infarction	11	0.0	24.5	-----	18.2	27.9	-----	18.2	30.1	-----
Congestive Heart Failure	32	15.6	15.3	-----	18.8	23.9	-----	21.9	29.9	-----
Pneumonia/Influenza	22	4.5	15.2	-----	13.6	20.9	-----	18.2	25.0	-----
Chronic Obstructive Pulmonary Disease	3	0.0	22.3	-----	33.3	34.8	-----	66.7	41.2	-----
Transient Cerebral Ischemia	7	0.0	1.1	-----	14.3	2.9	-----	14.3	5.1	-----
Stroke	21	14.3	19.7	-----	23.8	26.7	-----	23.8	30.3	-----
Hip Fracture	44	6.8	5.5	-----	13.6	10.2	-----	18.2	13.5	-----
Sepsis	5	20.0	18.3	-----	20.0	26.1	-----	20.0	30.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	162	1.2	1.0	1.1	1.9	1.8	1.2	2.5	2.5	1.2
Open Reduction of Hip Fracture	20	5.0	5.3	-----	10.0	9.8	-----	15.0	13.1	-----
Prostatectomy	7	0.0	1.5	-----	0.0	3.0	-----	0.0	4.7	-----
Cholecystectomy	2	0.0	4.2	-----	0.0	8.7	-----	0.0	12.9	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NATIONAL ORTHO & REHAB HOSPITAL

Medicare Provider Number: 490014

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	63.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	49.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	43.6 %
Admitted for emergency	48.7 %

COMORBIDITIES:

Cancer	2.3 %
Chronic cardiovascular disease	14.0 %
Chronic liver disease	1.1 %
Chronic renal disease	1.7 %
Chronic pulmonary disease	7.3 %
Cerebrovascular degeneration	2.6 %
Diabetes mellitus	3.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	38.3%
State	36.5%
Outside State	25.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	112
Occupancy Rate	50.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	39.4 %
Case Mix Index (CMI)	1.5033

STAFFING:

Total Number of Physicians	143
Percent of Physicians Board Certified Specialists	72.0 %
Medical Residents/Interns	0
Registered Nurses	120
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

NEWPORT NEWS GENERAL HOSPITAL

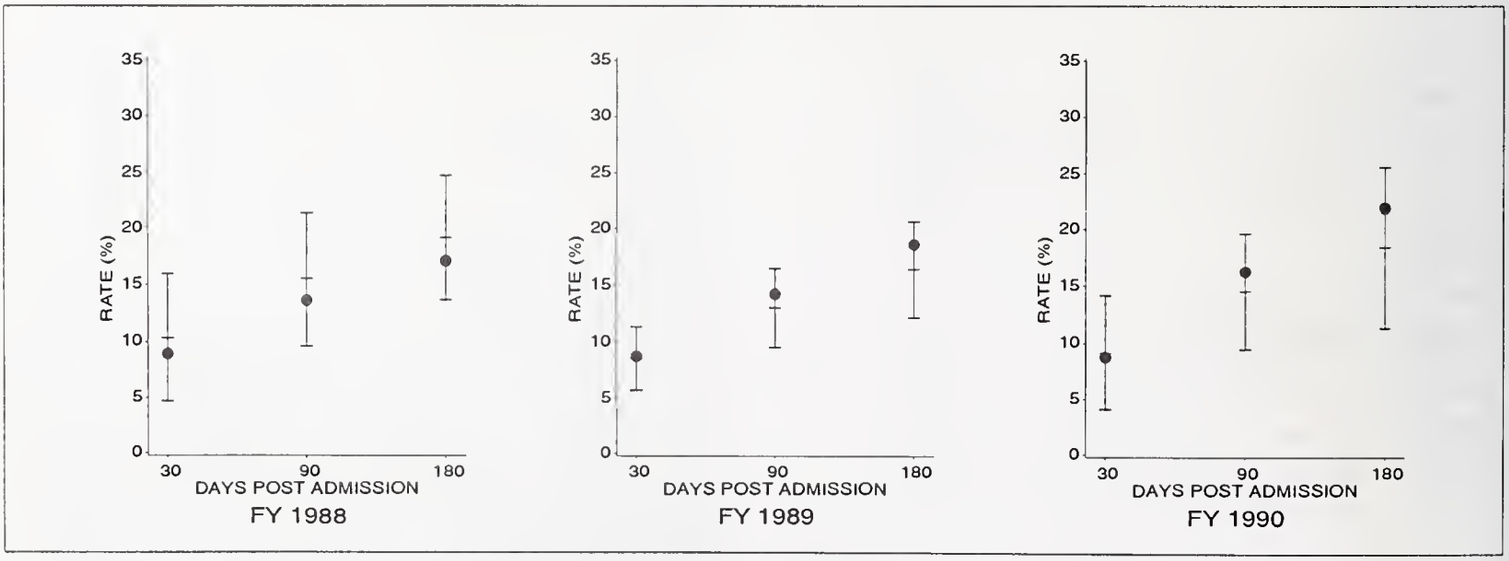
5100 MARSHALL AVE
NEWPORT NEWS, VA 23605
Medicare Provider Number: 490035

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	320	8.7	9.1	2.5	16.2	14.5	2.6	21.9	18.4	3.6
CONDITIONS:										
Acute Myocardial Infarction	2	50.0	23.6	-----	50.0	28.9	-----	50.0	32.0	-----
Congestive Heart Failure	19	5.3	13.9	-----	10.5	21.6	-----	21.1	27.7	-----
Pneumonia/Influenza	10	10.0	7.4	-----	10.0	10.3	-----	20.0	12.6	-----
Chronic Obstructive Pulmonary Disease	5	0.0	9.3	-----	0.0	15.5	-----	0.0	19.2	-----
Transient Cerebral Ischemia	2	0.0	2.6	-----	0.0	5.8	-----	0.0	9.6	-----
Stroke	16	6.3	17.3	-----	18.8	23.0	-----	37.5	27.1	-----
Hip Fracture	3	0.0	4.2	-----	0.0	8.1	-----	0.0	11.2	-----
Sepsis	2	50.0	32.7	-----	50.0	43.6	-----	50.0	48.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	2	0.0	3.0	-----	0.0	6.0	-----	0.0	8.4	-----
Open Reduction of Hip Fracture	1	0.0	4.5	-----	0.0	9.8	-----	0.0	14.1	-----
Prostatectomy	10	0.0	1.1	-----	0.0	2.9	-----	0.0	5.0	-----
Cholecystectomy	3	66.7	10.9	-----	66.7	15.0	-----	66.7	16.9	-----
Hysterectomy	1	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NEWPORT NEWS GENERAL HOSPITAL
Medicare Provider Number: 490035

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.9 years
Proportion female	55.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	32.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.3 %
Admitted for emergency	51.6 %

COMORBIDITIES:

Cancer	6.6 %
Chronic cardiovascular disease	25.6 %
Chronic liver disease	0.3 %
Chronic renal disease	6.6 %
Chronic pulmonary disease	12.2 %
Cerebrovascular degeneration	10.9 %
Diabetes mellitus	17.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	71.6%
State	27.8%
Outside State	0.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	78
Occupancy Rate	46.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1458

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

NORFOLK COMMUNITY HOSPITAL

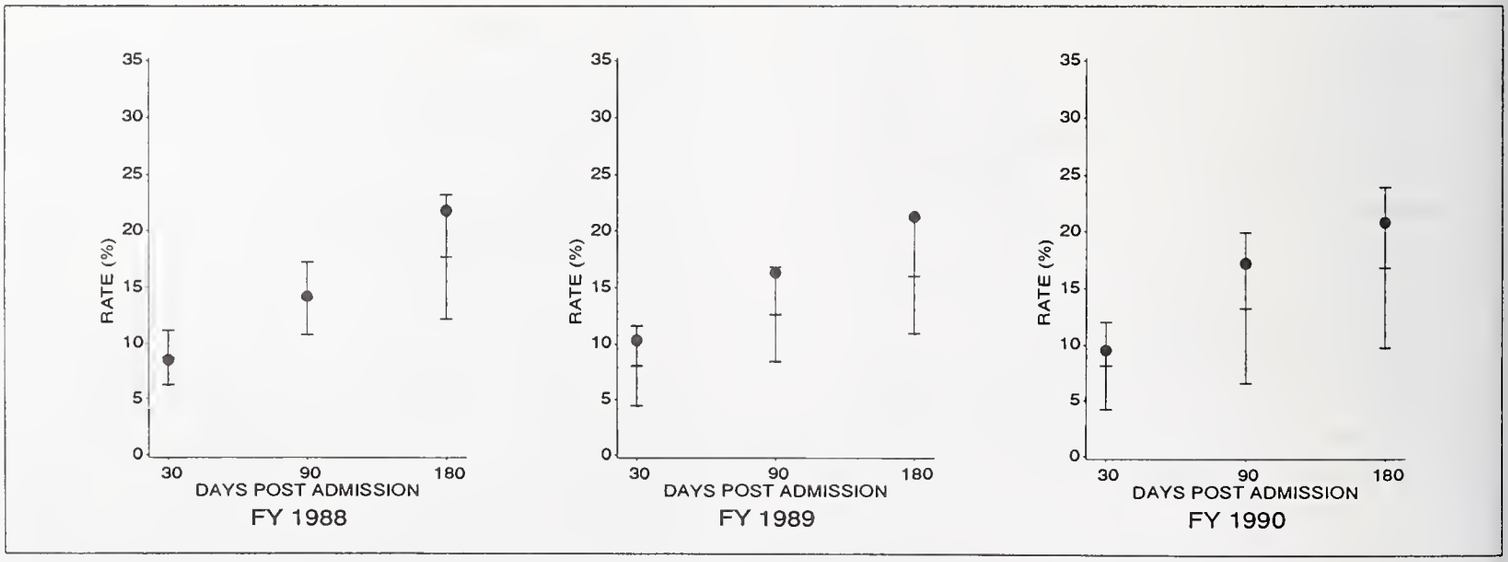
2539 CORPREW AVE
NORFOLK, VA 23504
Medicare Provider Number: 490030

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	337	9.5	8.1	2.0	17.2	13.2	3.3	20.8	16.8	3.6
CONDITIONS:										
Acute Myocardial Infarction	4	25.0	19.9	-----	25.0	23.2	-----	25.0	26.1	-----
Congestive Heart Failure	17	11.8	12.8	-----	11.8	20.7	-----	23.5	26.4	-----
Pneumonia/Influenza	14	21.4	17.2	-----	35.7	22.9	-----	35.7	26.1	-----
Chronic Obstructive Pulmonary Disease	11	0.0	4.5	-----	0.0	7.6	-----	0.0	10.3	-----
Transient Cerebral Ischemia	6	0.0	1.3	-----	0.0	2.8	-----	0.0	4.6	-----
Stroke	6	0.0	15.6	-----	16.7	22.0	-----	33.3	26.4	-----
Hip Fracture	8	25.0	7.5	-----	25.0	13.4	-----	25.0	17.2	-----
Sepsis	9	11.1	31.3	-----	55.6	39.0	-----	66.7	44.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	0.7	-----	0.0	1.8	-----	0.0	2.8	-----
Carotid Endarterectomy	1	0.0	1.4	-----	0.0	2.6	-----	0.0	3.5	-----
Hip Replacement/Reconstruction	3	0.0	8.3	-----	0.0	15.1	-----	0.0	19.7	-----
Open Reduction of Hip Fracture	4	25.0	6.3	-----	25.0	11.9	-----	25.0	15.6	-----
Prostatectomy	13	0.0	0.4	-----	0.0	1.0	-----	0.0	1.7	-----
Cholecystectomy	4	25.0	11.3	-----	50.0	21.4	-----	75.0	28.6	-----
Hysterectomy	4	0.0	1.9	-----	0.0	4.5	-----	0.0	6.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORFOLK COMMUNITY HOSPITAL
Medicare Provider Number: 490030

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.8 years
Proportion female	56.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	56.7 %
Transferred from skilled nursing facility	2.4 %
Admitted for elective procedure	34.4 %
Admitted for emergency	32.6 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	22.3 %
Chronic liver disease	1.2 %
Chronic renal disease	4.7 %
Chronic pulmonary disease	8.6 %
Cerebrovascular degeneration	1.8 %
Diabetes mellitus	13.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	71.4%
State	27.6%
Outside State	1.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	126
Occupancy Rate	34.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	28.4 %
Case Mix Index (CMI)	1.2739

STAFFING:

Total Number of Physicians	231
Percent of Physicians Board Certified Specialists	74.5 %
Medical Residents/Interns	3
Registered Nurses	45
Licensed Practical Nurses	16

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

NORTHAMPTON ACCOMACK MEMORIAL HOSPITAL

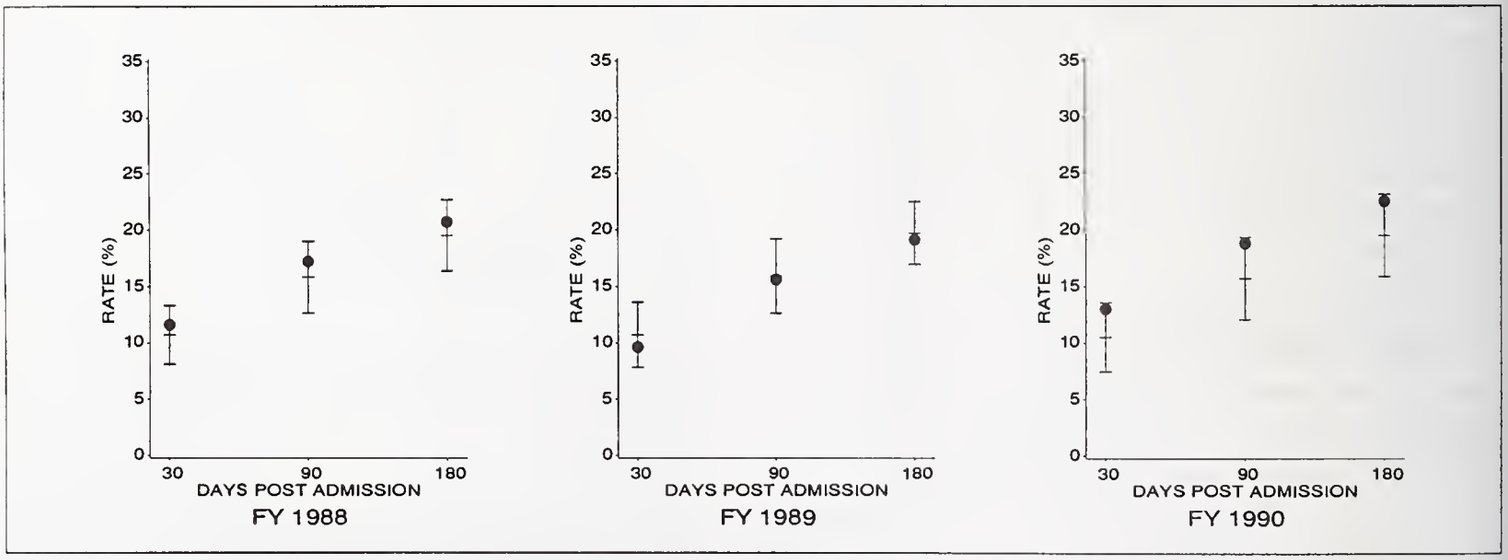
P O BOX 17
NASSAWADOX, VA 23413
Medicare Provider Number: 490037

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1336	13.0	10.5	1.5	18.8	15.7	1.8	22.5	19.5	1.8
CONDITIONS:										
Acute Myocardial Infarction	26	42.3	34.3	-----	42.3	36.8	-----	42.3	40.0	-----
Congestive Heart Failure	64	10.9	15.3	8.2	28.1	24.0	8.0	31.3	30.0	7.8
Pneumonia/Influenza	60	23.3	18.0	6.6	28.3	25.0	6.5	33.3	29.5	6.9
Chronic Obstructive Pulmonary Disease	30	6.7	8.4	-----	6.7	14.7	-----	10.0	19.6	-----
Transient Cerebral Ischemia	11	0.0	1.8	-----	9.1	4.1	-----	9.1	6.5	-----
Stroke	67	28.4	21.1	5.7	34.3	27.3	6.2	44.8	31.3	7.4
Hip Fracture	27	3.7	6.9	-----	3.7	12.0	-----	14.8	15.5	-----
Sepsis	10	80.0	35.0	-----	80.0	44.1	-----	80.0	49.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	8	0.0	3.5	-----	0.0	6.6	-----	0.0	9.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	11	9.1	5.3	-----	9.1	9.5	-----	9.1	12.5	-----
Open Reduction of Hip Fracture	9	0.0	4.4	-----	0.0	8.6	-----	11.1	11.8	-----
Prostatectomy	12	0.0	0.8	-----	0.0	1.9	-----	0.0	3.3	-----
Cholecystectomy	14	14.3	2.1	-----	14.3	4.0	-----	14.3	5.6	-----
Hysterectomy	8	0.0	0.1	-----	0.0	0.2	-----	0.0	0.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTHAMPTON ACCOMACK MEMORIAL HOSPITAL

Medicare Provider Number: 490037

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.2 years
Proportion female	57.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	19.3 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	14.3 %
Admitted for emergency	77.1 %

COMORBIDITIES:

Cancer	9.3 %
Chronic cardiovascular disease	29.9 %
Chronic liver disease	0.5 %
Chronic renal disease	4.3 %
Chronic pulmonary disease	15.6 %
Cerebrovascular degeneration	9.0 %
Diabetes mellitus	8.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	34.1%
State	63.0%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	158
Occupancy Rate	60.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	49.4 %
Case Mix Index (CMI)	1.1056

STAFFING:

Total Number of Physicians	35
Percent of Physicians Board Certified Specialists	45.7 %
Medical Residents/Interns	0
Registered Nurses	64
Licensed Practical Nurses	68

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

NORTHERN VIRGINIA DOCTORS HOSPITAL

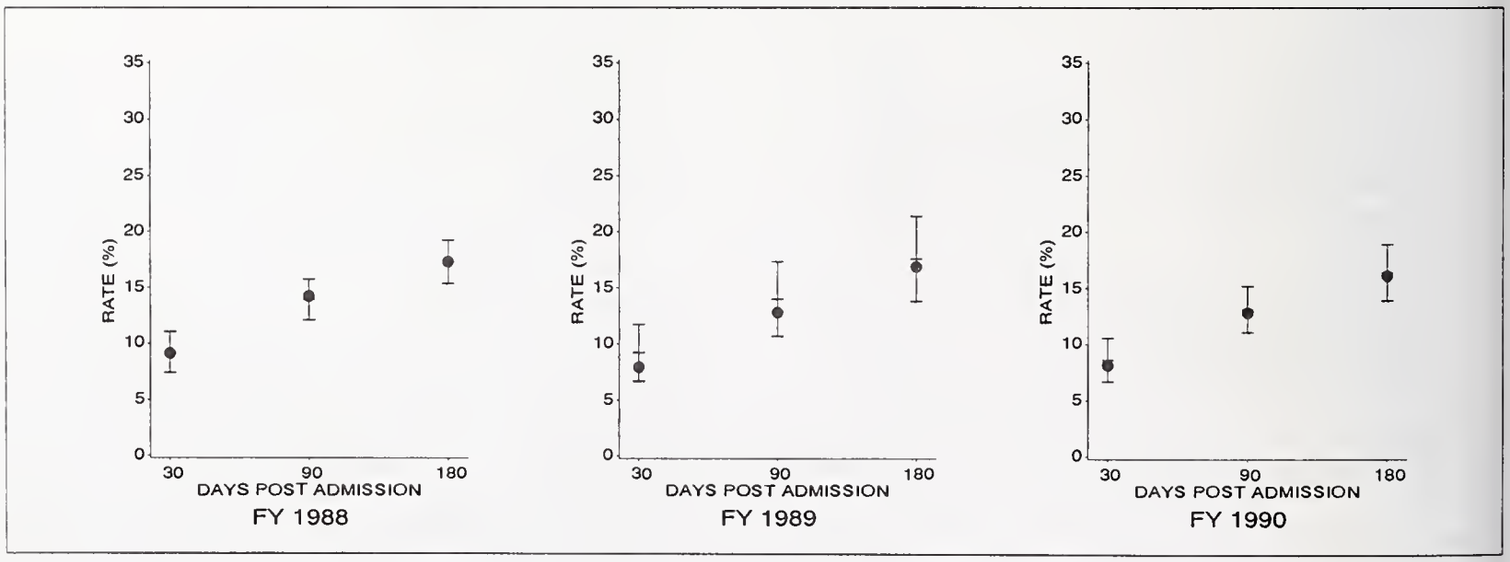
601 CARLIN SPRINGS RD
ARLINGTON, VA 22204
Medicare Provider Number: 490073

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1215	8.1	8.6	1.0	12.8	13.1	1.0	16.1	16.4	1.3
CONDITIONS:										
Acute Myocardial Infarction	24	16.7	25.4	-----	16.7	28.8	-----	20.8	31.6	-----
Congestive Heart Failure	48	25.0	15.2	-----	37.5	23.4	-----	47.9	29.6	-----
Pneumonia/Influenza	60	13.3	16.7	5.6	23.3	22.9	5.7	28.3	26.7	6.2
Chronic Obstructive Pulmonary Disease	18	22.2	12.3	-----	27.8	21.4	-----	38.9	27.0	-----
Transient Cerebral Ischemia	26	0.0	2.3	-----	0.0	5.2	-----	0.0	8.2	-----
Stroke	52	25.0	21.4	6.6	28.8	27.4	8.4	36.5	31.4	7.9
Hip Fracture	34	5.9	6.5	-----	5.9	11.9	-----	5.9	15.8	-----
Sepsis	15	33.3	36.4	-----	53.3	44.8	-----	53.3	49.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	6	0.0	4.0	-----	16.7	9.1	-----	16.7	14.3	-----
Carotid Endarterectomy	12	0.0	0.8	-----	0.0	1.5	-----	0.0	2.4	-----
Hip Replacement/Reconstruction	15	6.7	5.8	-----	6.7	11.5	-----	6.7	15.5	-----
Open Reduction of Hip Fracture	14	7.1	5.6	-----	7.1	10.3	-----	7.1	13.8	-----
Prostatectomy	50	0.0	0.8	-----	2.0	1.9	-----	2.0	3.2	-----
Cholecystectomy	11	0.0	1.2	-----	0.0	2.5	-----	0.0	3.6	-----
Hysterectomy	9	0.0	0.1	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTHERN VIRGINIA DOCTORS HOSPITAL

Medicare Provider Number: 490073

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	62.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.8 %
Transferred from skilled nursing facility	4.4 %
Admitted for elective procedure	17.4 %
Admitted for emergency	50.8 %

COMORBIDITIES:

Cancer	6.1 %
Chronic cardiovascular disease	29.4 %
Chronic liver disease	0.7 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	10.7 %
Cerebrovascular degeneration	4.9 %
Diabetes mellitus	5.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	38.9%
State	53.0%
Outside State	8.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	211
Occupancy Rate	50.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1242

STAFFING:

Total Number of Physicians	157
Percent of Physicians Board Certified Specialists	78.3 %
Medical Residents/Interns	9
Registered Nurses	151
Licensed Practical Nurses	13

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

NORTON COMMUNITY HOSPITAL

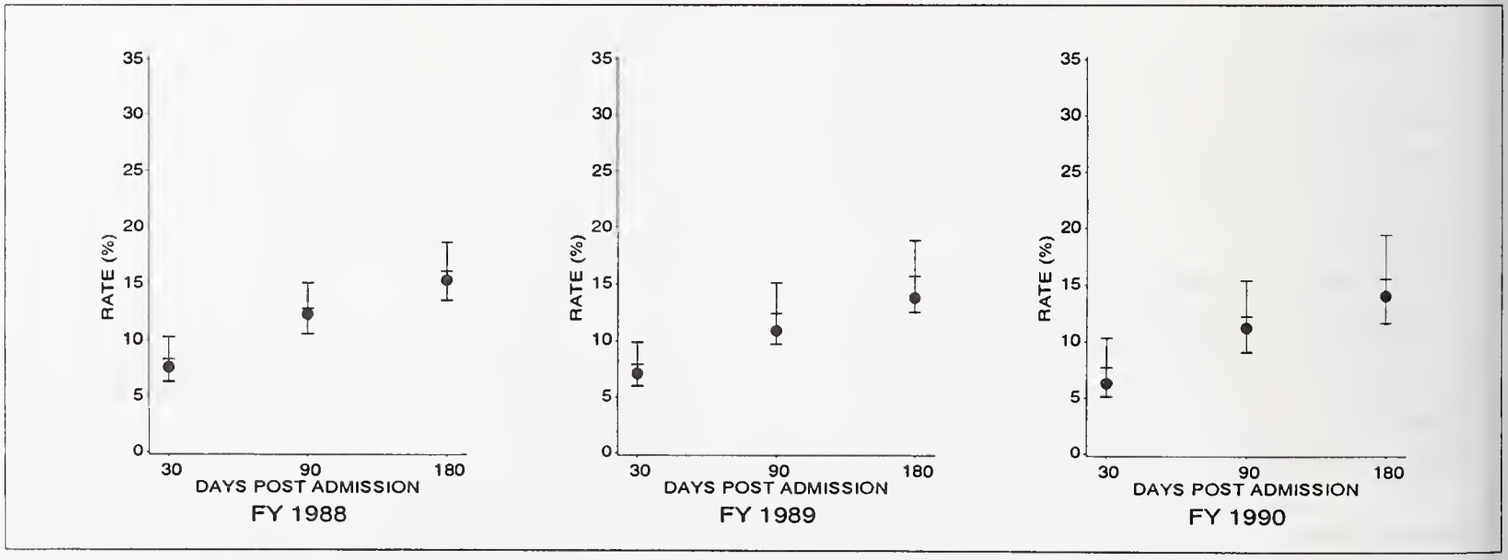
100 15TH ST NW
NORTON, VA 24273
Medicare Provider Number: 490001

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	856	6.3	7.7	1.3	11.2	12.2	1.6	14.0	15.5	2.0
CONDITIONS:										
Acute Myocardial Infarction	26	23.1	20.5	-----	26.9	24.3	-----	26.9	27.1	-----
Congestive Heart Failure	32	3.1	16.8	-----	15.6	27.9	-----	18.8	35.4	-----
Pneumonia/Influenza	47	23.4	15.3	-----	31.9	21.4	-----	31.9	25.1	-----
Chronic Obstructive Pulmonary Disease	54	5.6	5.3	4.7	5.6	10.2	5.6	5.6	14.3	6.3
Transient Cerebral Ischemia	14	0.0	1.3	-----	0.0	3.0	-----	0.0	5.1	-----
Stroke	19	15.8	14.4	-----	15.8	20.0	-----	15.8	23.6	-----
Hip Fracture	15	13.3	4.7	-----	13.3	8.3	-----	13.3	11.2	-----
Sepsis	5	0.0	13.2	-----	20.0	17.3	-----	20.0	21.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	4.2	-----	33.3	8.5	-----	33.3	12.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	9	0.0	2.5	-----	0.0	5.0	-----	0.0	6.9	-----
Open Reduction of Hip Fracture	5	20.0	4.2	-----	20.0	7.4	-----	20.0	10.2	-----
Prostatectomy	31	0.0	0.8	-----	3.2	1.9	-----	3.2	3.2	-----
Cholecystectomy	8	0.0	1.0	-----	0.0	1.9	-----	0.0	2.5	-----
Hysterectomy	2	0.0	0.2	-----	0.0	0.6	-----	0.0	1.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTON COMMUNITY HOSPITAL
Medicare Provider Number: 490001

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.1 years
Proportion female	50.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	86.7 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	5.6 %
Admitted for emergency	86.1 %

COMORBIDITIES:

Cancer	5.3 %
Chronic cardiovascular disease	28.3 %
Chronic liver disease	1.3 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	22.4 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	8.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	21.7%
State	72.0%
Outside State	6.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	129
Occupancy Rate	45.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1272

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

Not used in calculating mortality rates

PAGE MEMORIAL HOSPITAL

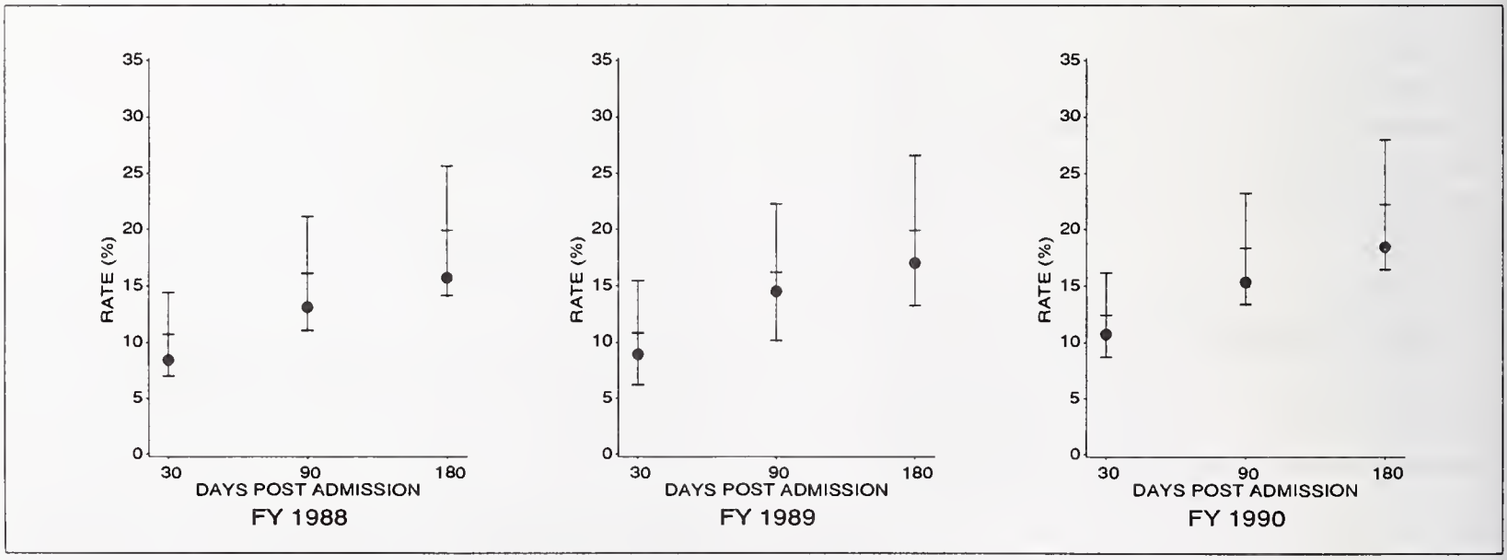
200 MEMORIAL DRIVE
LURAY, VA 22835
Medicare Provider Number: 490047

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	450	10.7	12.4	1.9	15.3	18.3	2.5	18.4	22.2	2.9
CONDITIONS:										
Acute Myocardial Infarction	12	25.0	17.6	-----	25.0	20.5	-----	25.0	22.7	-----
Congestive Heart Failure	61	8.2	15.7	6.0	14.8	24.5	8.8	18.0	31.0	9.5
Pneumonia/Influenza	38	13.2	16.3	-----	21.1	21.8	-----	23.7	25.6	-----
Chronic Obstructive Pulmonary Disease	2	0.0	12.7	-----	0.0	21.2	-----	0.0	25.9	-----
Transient Cerebral Ischemia	4	0.0	0.7	-----	0.0	1.7	-----	0.0	2.9	-----
Stroke	11	27.3	18.1	-----	27.3	23.8	-----	27.3	27.5	-----
Hip Fracture	6	0.0	10.3	-----	0.0	18.5	-----	0.0	24.4	-----
Sepsis	6	33.3	33.6	-----	33.3	42.1	-----	50.0	46.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	1.5	-----	0.0	3.2	-----	0.0	5.5	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	4.9	-----	0.0	8.5	-----	0.0	11.2	-----
Open Reduction of Hip Fracture	2	0.0	15.7	-----	0.0	30.8	-----	0.0	42.2	-----
Prostatectomy	0									
Cholecystectomy	10	0.0	3.4	-----	0.0	7.2	-----	10.0	10.3	-----
Hysterectomy	1	0.0	0.1	-----	0.0	0.1	-----	0.0	0.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PAGE MEMORIAL HOSPITAL
Medicare Provider Number: 490047

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.5 years
Proportion female	59.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	55.1 %

COMORBIDITIES:

Cancer	5.1 %
Chronic cardiovascular disease	32.0 %
Chronic liver disease	0.9 %
Chronic renal disease	5.1 %
Chronic pulmonary disease	16.0 %
Cerebrovascular degeneration	2.2 %
Diabetes mellitus	11.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	89.5%
State	8.7%
Outside State	1.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	40
Occupancy Rate	54.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	53.6 %
Case Mix Index (CMI)	1.1691

STAFFING:

Total Number of Physicians	8
Percent of Physicians Board Certified Specialists	50.0 %
Medical Residents/Interns	0
Registered Nurses	25
Licensed Practical Nurses	13

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

PORTSMOUTH GENERAL HOSPITAL

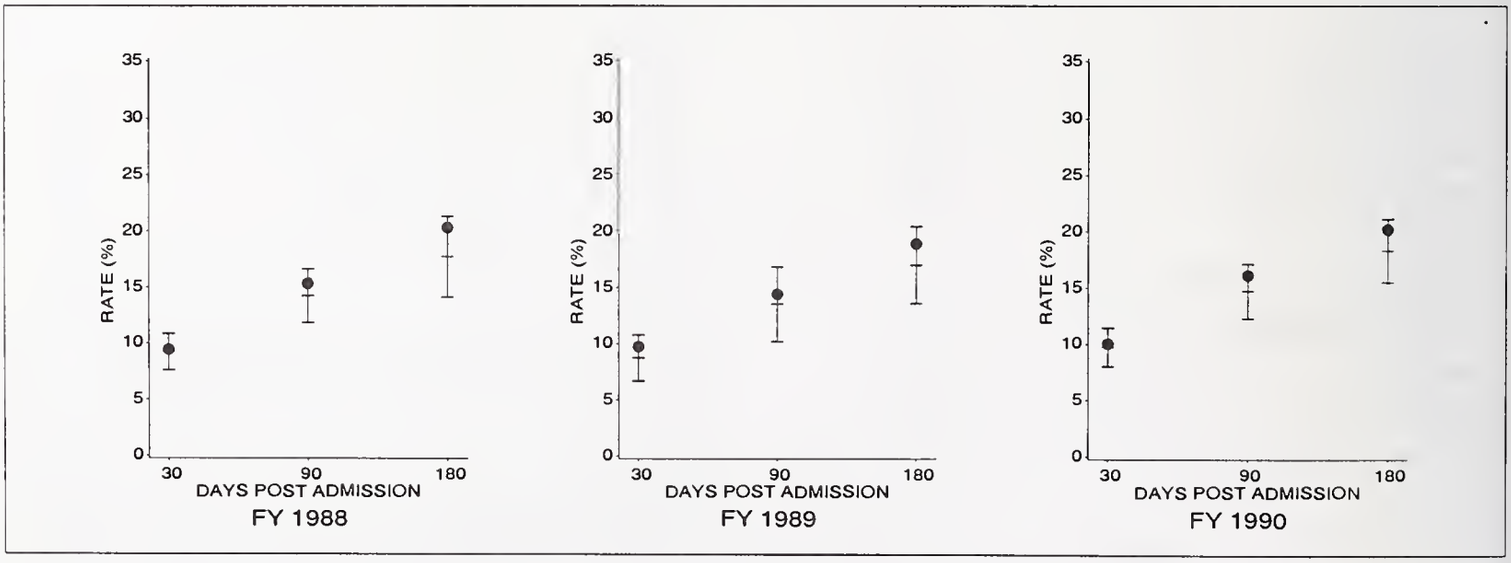
850 CRAWFORD PRKWY
PORTSMOUTH, VA 23704
Medicare Provider Number: 490074

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1327	10.0	9.7	0.9	16.1	14.7	1.2	20.2	18.3	1.4
CONDITIONS:										
Acute Myocardial Infarction	34	23.5	24.6	-----	26.5	27.7	-----	29.4	30.4	-----
Congestive Heart Failure	88	17.0	13.0	4.5	21.6	21.3	4.5	23.9	27.0	5.3
Pneumonia/Influenza	50	22.0	17.7	-----	36.0	24.6	-----	44.0	28.9	-----
Chronic Obstructive Pulmonary Disease	25	12.0	9.6	-----	20.0	16.8	-----	32.0	21.7	-----
Transient Cerebral Ischemia	21	0.0	1.7	-----	0.0	4.0	-----	9.5	6.5	-----
Stroke	68	20.6	17.9	5.0	35.3	25.2	8.0	39.7	29.1	8.7
Hip Fracture	16	12.5	4.3	-----	12.5	7.9	-----	12.5	10.4	-----
Sepsis	30	26.7	27.3	-----	33.3	35.3	-----	36.7	40.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	7	0.0	5.1	-----	0.0	9.2	-----	14.3	12.5	-----
Carotid Endarterectomy	5	20.0	1.5	-----	20.0	2.7	-----	20.0	4.0	-----
Hip Replacement/Reconstruction	9	0.0	2.0	-----	11.1	4.1	-----	22.2	5.8	-----
Open Reduction of Hip Fracture	7	14.3	5.5	-----	14.3	10.1	-----	14.3	13.1	-----
Prostatectomy	39	0.0	0.9	-----	2.6	2.2	-----	2.6	3.7	-----
Cholecystectomy	28	7.1	3.0	-----	10.7	6.3	-----	10.7	8.8	-----
Hysterectomy	7	0.0	0.3	-----	0.0	0.6	-----	0.0	0.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PORTSMOUTH GENERAL HOSPITAL
Medicare Provider Number: 490074

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.9 years
Proportion female	60.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.6 %
Transferred from skilled nursing facility	0.8 %
Admitted for elective procedure	4.2 %
Admitted for emergency	50.3 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	25.1 %
Chronic liver disease	1.1 %
Chronic renal disease	11.2 %
Chronic pulmonary disease	10.0 %
Cerebrovascular degeneration	6.3 %
Diabetes mellitus	9.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	77.9%
State	19.5%
Outside State	2.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	184
Occupancy Rate	62.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.7 %
Case Mix Index (CMI)	1.2641

STAFFING:

Total Number of Physicians	237
Percent of Physicians Board Certified Specialists	82.7 %
Medical Residents/Interns	0
Registered Nurses	184
Licensed Practical Nurses	61

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

POTOMAC HOSPITAL **

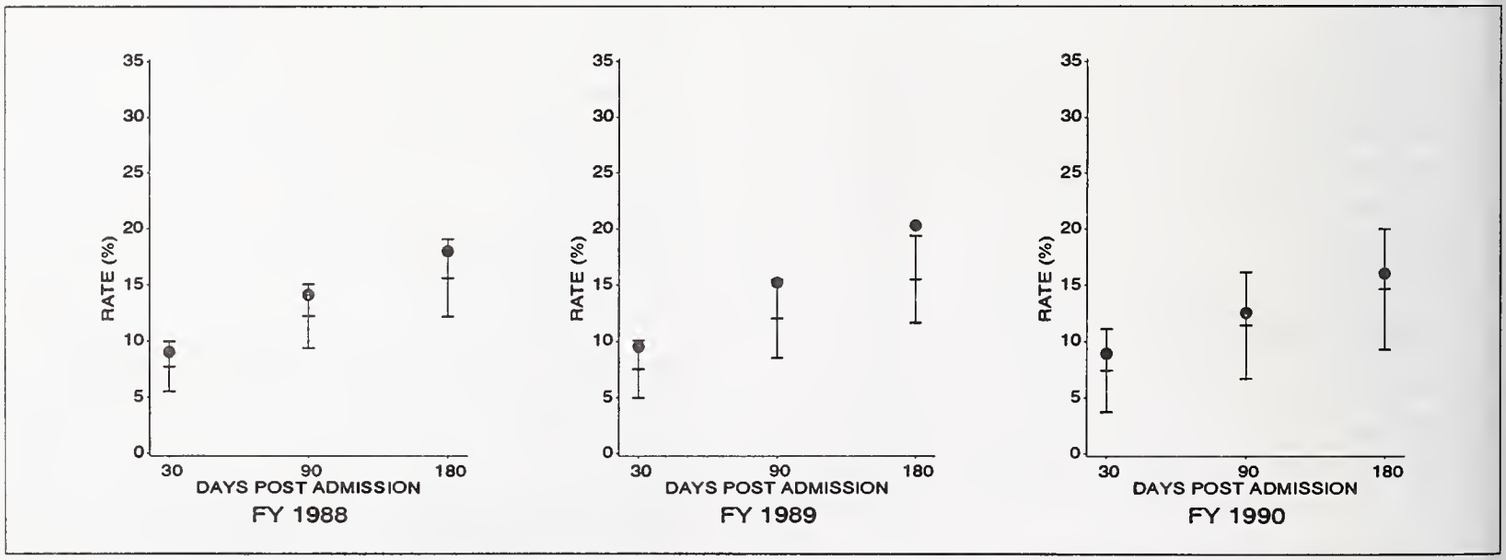
2300 OPITZ BOULEVARD
WOODBRIDGE, VA 22191
Medicare Provider Number: 490113

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	750	8.9	7.4	1.9	12.5	11.4	2.4	16.0	14.6	2.7
CONDITIONS:										
Acute Myocardial Infarction	20	20.0	22.6	-----	25.0	25.2	-----	25.0	27.3	-----
Congestive Heart Failure	41	12.2	13.6	-----	12.2	21.8	-----	17.1	28.1	-----
Pneumonia/Influenza	35	20.0	11.4	-----	20.0	17.1	-----	20.0	20.8	-----
Chronic Obstructive Pulmonary Disease	14	0.0	6.6	-----	14.3	12.4	-----	28.6	16.8	-----
Transient Cerebral Ischemia	14	0.0	1.3	-----	7.1	3.2	-----	7.1	5.5	-----
Stroke	37	18.9	12.6	-----	24.3	17.6	-----	24.3	20.8	-----
Hip Fracture	17	0.0	3.1	-----	5.9	6.1	-----	5.9	8.3	-----
Sepsis	12	25.0	19.4	-----	25.0	27.7	-----	25.0	32.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	8	12.5	2.3	-----	12.5	4.9	-----	25.0	7.4	-----
Carotid Endarterectomy	1	0.0	1.9	-----	0.0	3.3	-----	0.0	4.8	-----
Hip Replacement/Reconstruction	4	0.0	2.3	-----	25.0	4.5	-----	25.0	6.3	-----
Open Reduction of Hip Fracture	9	0.0	2.8	-----	0.0	5.6	-----	0.0	7.7	-----
Prostatectomy	14	0.0	1.4	-----	0.0	3.0	-----	0.0	4.7	-----
Cholecystectomy	15	6.7	2.0	-----	6.7	3.8	-----	6.7	5.2	-----
Hysterectomy	4	0.0	0.7	-----	0.0	1.9	-----	0.0	3.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases Is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



** This hospital says that it submitted inaccurate data to Medicare and that its predicted mortality rate should be higher than that presented above.

POTOMAC HOSPITAL
Medicare Provider Number: 490113

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.9 years
Proportion female	58.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.6 %
Transferred from skilled nursing facility	5.3 %
Admitted for elective procedure	80.4 %
Admitted for emergency	0.1 %

COMORBIDITIES:

Cancer	5.5 %
Chronic cardiovascular disease	37.2 %
Chronic liver disease	0.9 %
Chronic renal disease	4.1 %
Chronic pulmonary disease	18.4 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	66.8%
State	22.7%
Outside State	10.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	153
Occupancy Rate	54.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	16.1 %
Case Mix Index (CMI)	1.1960

STAFFING:

Total Number of Physicians	125
Percent of Physicians Board Certified Specialists	80.0 %
Medical Residents/Interns	0
Registered Nurses	195
Licensed Practical Nurses	12

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

PRINCE WILLIAM HOSPITAL

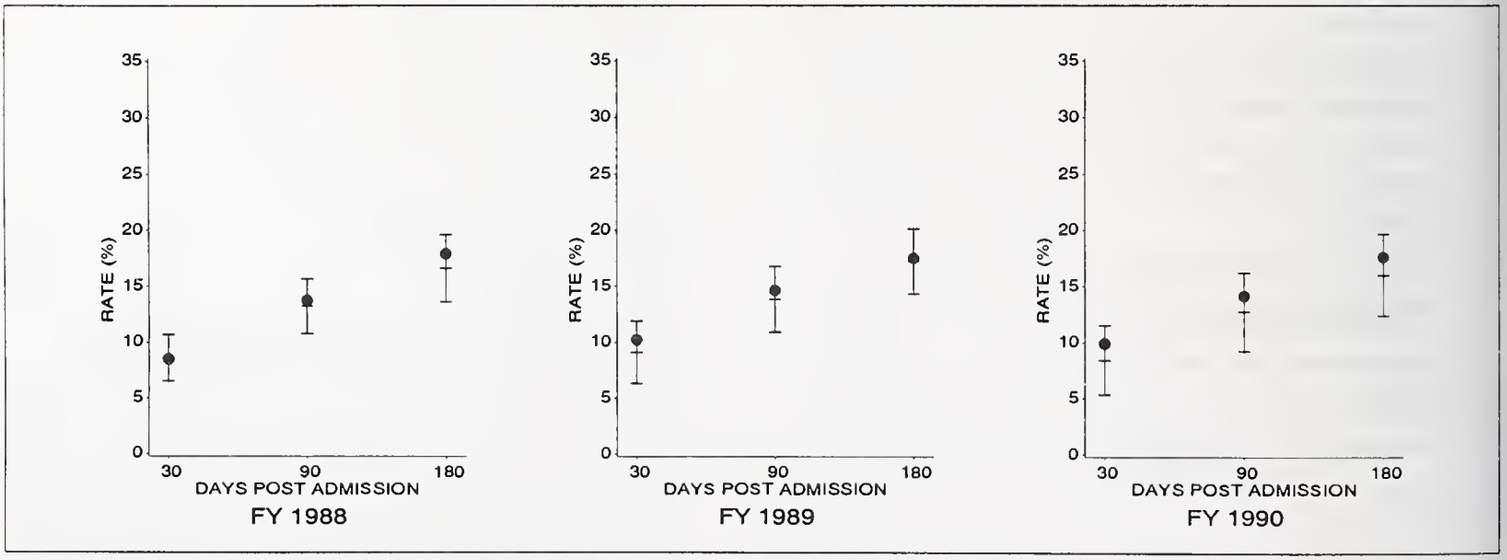
8700 SUDLEY ROAD
MANASSAS, VA 22110
Medicare Provider Number: 490045

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	920	9.9	8.4	1.5	14.1	12.7	1.8	17.6	16.0	1.8
CONDITIONS:										
Acute Myocardial Infarction	22	27.3	23.0	-----	31.8	25.6	-----	36.4	28.3	-----
Congestive Heart Failure	44	11.4	15.5	-----	18.2	24.1	-----	22.7	30.5	-----
Pneumonia/Influenza	56	10.7	15.4	5.8	19.6	21.3	5.6	23.2	25.2	6.0
Chronic Obstructive Pulmonary Disease	25	4.0	9.5	-----	12.0	15.5	-----	12.0	19.7	-----
Transient Cerebral Ischemia	10	0.0	1.5	-----	0.0	3.3	-----	0.0	5.4	-----
Stroke	37	32.4	20.0	-----	32.4	25.8	-----	35.1	29.5	-----
Hip Fracture	28	14.3	6.0	-----	14.3	11.5	-----	21.4	15.5	-----
Sepsis	10	10.0	22.9	-----	10.0	27.8	-----	20.0	31.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	1.8	-----	0.0	3.8	-----	0.0	5.7	-----
Carotid Endarterectomy	4	0.0	0.7	-----	0.0	1.3	-----	0.0	2.2	-----
Hip Replacement/Reconstruction	9	22.2	3.1	-----	22.2	5.7	-----	22.2	7.6	-----
Open Reduction of Hip Fracture	13	7.7	5.6	-----	7.7	11.0	-----	15.4	15.1	-----
Prostatectomy	24	0.0	0.4	-----	0.0	0.9	-----	0.0	1.6	-----
Cholecystectomy	18	0.0	0.9	-----	5.6	1.6	-----	5.6	2.1	-----
Hysterectomy	6	0.0	0.6	-----	0.0	1.5	-----	0.0	2.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PRINCE WILLIAM HOSPITAL
Medicare Provider Number: 490045

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.6 years
Proportion female	57.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	34.3 %
Transferred from skilled nursing facility	5.8 %
Admitted for elective procedure	18.5 %
Admitted for emergency	62.7 %

COMORBIDITIES:

Cancer	5.8 %
Chronic cardiovascular disease	24.1 %
Chronic liver disease	1.5 %
Chronic renal disease	2.9 %
Chronic pulmonary disease	15.3 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	7.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	55.0%
State	37.4%
Outside State	7.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.4 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	170
Occupancy Rate	58.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1172

STAFFING:

Total Number of Physicians	112
Percent of Physicians Board Certified Specialists	77.7 %
Medical Residents/Interns	0
Registered Nurses	116
Licensed Practical Nurses	37

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

PULASKI COMMUNITY HOSPITAL

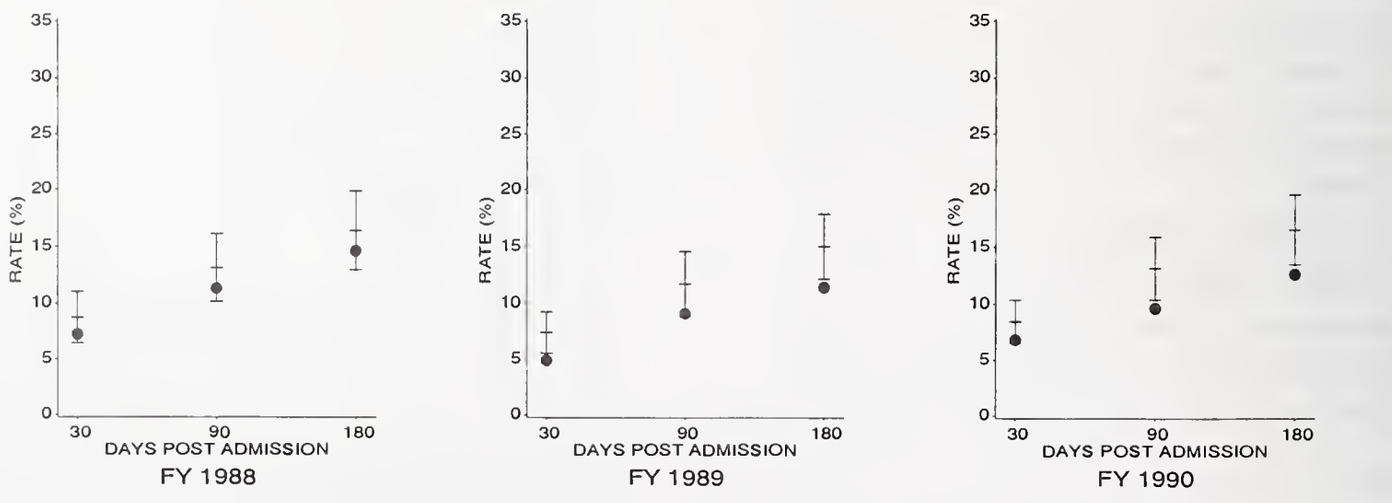
2400 LEE HIGHWAY
PULASKI, VA 24301
Medicare Provider Number: 490116

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1001	6.8	8.4	1.0	9.6	13.1	1.4	12.6	16.5	1.5
CONDITIONS:										
Acute Myocardial Infarction	29	27.6	28.4	-----	34.5	33.5	-----	34.5	36.9	-----
Congestive Heart Failure	47	10.6	15.3	-----	12.8	24.6	-----	21.3	31.1	-----
Pneumonia/Influenza	40	10.0	16.9	-----	15.0	23.4	-----	20.0	27.3	-----
Chronic Obstructive Pulmonary Disease	41	0.0	5.9	-----	4.9	11.2	-----	7.3	15.4	-----
Transient Cerebral Ischemia	13	0.0	2.2	-----	0.0	5.3	-----	7.7	8.9	-----
Stroke	28	17.9	20.3	-----	17.9	28.9	-----	17.9	33.4	-----
Hip Fracture	8	0.0	7.6	-----	0.0	12.7	-----	0.0	16.2	-----
Sepsis	15	6.7	22.6	-----	6.7	28.2	-----	13.3	31.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	3.1	-----	0.0	6.5	-----	0.0	10.6	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	3	0.0	7.9	-----	0.0	14.2	-----	0.0	18.3	-----
Open Reduction of Hip Fracture	1	0.0	7.0	-----	0.0	11.1	-----	0.0	14.3	-----
Prostatectomy	42	0.0	0.9	-----	2.4	2.1	-----	2.4	3.5	-----
Cholecystectomy	25	0.0	6.4	-----	0.0	11.6	-----	8.0	14.3	-----
Hysterectomy	6	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PULASKI COMMUNITY HOSPITAL

Medicare Provider Number: 490116

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.7 years
Proportion female	58.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.0 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	2.2 %
Admitted for emergency	57.2 %

COMORBIDITIES:

Cancer	5.1 %
Chronic cardiovascular disease	34.3 %
Chronic liver disease	0.9 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	20.6 %
Cerebrovascular degeneration:	5.3 %
Diabetes mellitus	14.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.4%
State	15.5%
Outside State	2.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	99
Occupancy Rate	63.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	50.9 %
Case Mix Index (CMI)	1.1171

STAFFING:

Total Number of Physicians	23
Percent of Physicians Board Certified Specialists	69.6 %
Medical Residents/Interns	0
Registered Nurses	73
Licensed Practical Nurses	49

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

R J REYNOLDS-PATRICK CTY MEM HOSPITAL

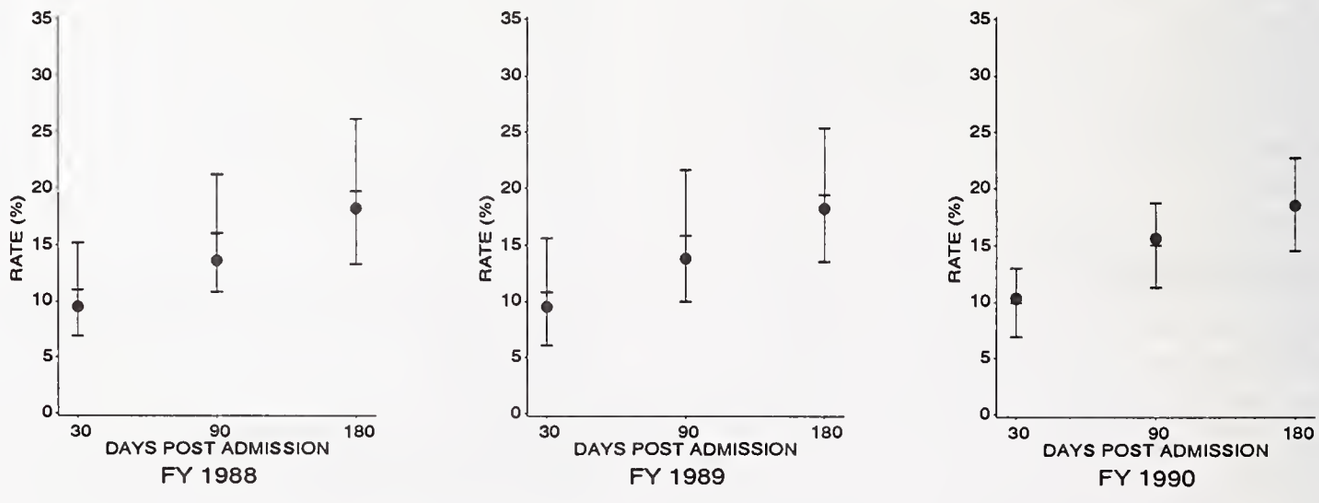
ROUTE 2
STUART, VA 24171
Medicare Provider Number: 490054

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	448	10.3	9.9	1.5	15.6	15.0	1.9	18.5	18.6	2.0
CONDITIONS:										
Acute Myocardial Infarction	7	28.6	32.5	-----	28.6	35.6	-----	28.6	38.7	-----
Congestive Heart Failure	14	7.1	15.5	-----	14.3	24.5	-----	21.4	31.1	-----
Pneumonia/Influenza	37	13.5	14.5	-----	24.3	20.5	-----	29.7	24.4	-----
Chronic Obstructive Pulmonary Disease	2	0.0	4.1	-----	0.0	8.4	-----	50.0	12.0	-----
Transient Cerebral Ischemia	7	0.0	0.9	-----	0.0	2.1	-----	0.0	3.6	-----
Stroke	19	10.5	17.8	-----	31.6	24.3	-----	31.6	28.4	-----
Hip Fracture	8	0.0	6.1	-----	0.0	10.7	-----	0.0	14.2	-----
Sepsis	15	33.3	21.4	-----	33.3	27.4	-----	33.3	31.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	3	0.0	6.2	-----	0.0	10.8	-----	0.0	13.3	-----
Open Reduction of Hip Fracture	4	0.0	5.1	-----	0.0	9.4	-----	0.0	13.3	-----
Prostatectomy	4	25.0	0.9	-----	25.0	1.9	-----	25.0	3.2	-----
Cholecystectomy	8	0.0	1.5	-----	0.0	2.7	-----	0.0	3.6	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



R J REYNOLDS-PATRICK CTY MEM HOSPITAL

Medicare Provider Number: 490054

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	60.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	44.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.7 %
Admitted for emergency	16.3 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	33.7 %
Chronic liver disease	0.4 %
Chronic renal disease	0.9 %
Chronic pulmonary disease	12.7 %
Cerebrovascular degeneration	5.8 %
Diabetes mellitus	6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	76.0%
State	16.2%
Outside State	7.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.4 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	66
Occupancy Rate	56.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	42.1 %
Case Mix Index (CMI)	1.0918

STAFFING:

Total Number of Physicians	8
Percent of Physicians Board Certified Specialists	37.5 %
Medical Residents/Interns	0
Registered Nurses	26
Licensed Practical Nurses	13

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

RADFORD COMMUNITY HOSPITAL

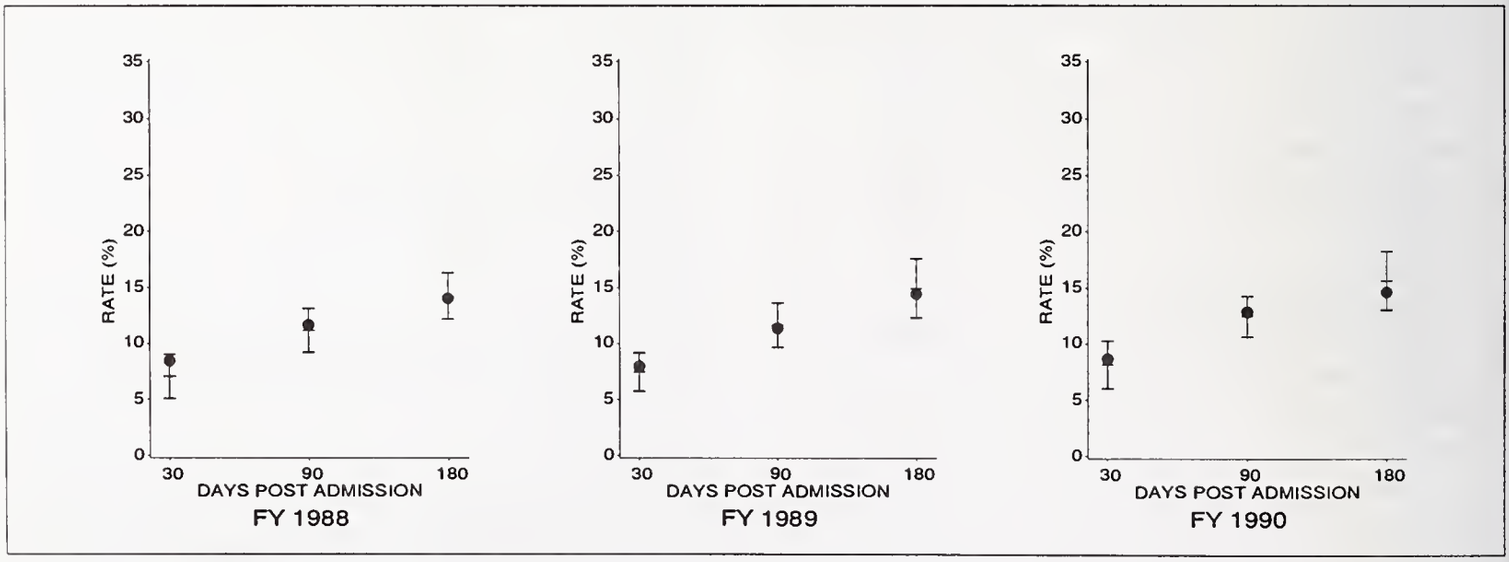
8TH & RANDOLPH STS
RADFORD, VA 24141
Medicare Provider Number: 490042

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1373	8.6	8.1	1.1	12.8	12.4	0.9	14.6	15.6	1.3
CONDITIONS:										
Acute Myocardial Infarction	59	27.1	23.6	9.5	33.9	27.1	7.7	35.6	29.9	7.3
Congestive Heart Failure	83	20.5	13.9	6.6	27.7	22.2	7.3	28.9	28.4	6.8
Pneumonia/Influenza	59	10.2	14.0	5.1	13.6	19.1	6.5	15.3	22.4	7.6
Chronic Obstructive Pulmonary Disease	26	3.8	5.5	-----	11.5	10.4	-----	15.4	14.6	-----
Transient Cerebral Ischemia	12	0.0	2.2	-----	0.0	4.8	-----	0.0	7.6	-----
Stroke	38	28.9	22.5	-----	31.6	29.5	-----	34.2	33.4	-----
Hip Fracture	40	5.0	6.1	-----	10.0	10.9	-----	15.0	14.5	-----
Sepsis	11	18.2	19.4	-----	27.3	29.0	-----	45.5	34.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	21	9.5	4.5	-----	14.3	7.6	-----	14.3	10.0	-----
Carotid Endarterectomy	18	0.0	1.6	-----	0.0	3.0	-----	0.0	4.3	-----
Hip Replacement/Reconstruction	22	0.0	2.8	-----	9.1	5.6	-----	13.6	7.9	-----
Open Reduction of Hip Fracture	28	7.1	5.8	-----	10.7	10.9	-----	14.3	14.7	-----
Prostatectomy	22	0.0	0.6	-----	0.0	1.3	-----	0.0	2.3	-----
Cholecystectomy	43	2.3	3.1	-----	2.3	5.3	-----	2.3	6.9	-----
Hysterectomy	8	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RADFORD COMMUNITY HOSPITAL
Medicare Provider Number: 490042

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	56.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	30.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	7.7 %
Admitted for emergency	16.8 %

COMORBIDITIES:

Cancer	5.2 %
Chronic cardiovascular disease	41.4 %
Chronic liver disease	0.9 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	23.7 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	8.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	28.9%
State	68.8%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	141
Occupancy Rate	66.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	40.2 %
Case Mix Index (CMI)	1.2349

STAFFING:

Total Number of Physicians	77
Percent of Physicians Board Certified Specialists	79.2 %
Medical Residents/Interns	0
Registered Nurses	109
Licensed Practical Nurses	52

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

RAPPAHANNOCK GENERAL HOSPITAL

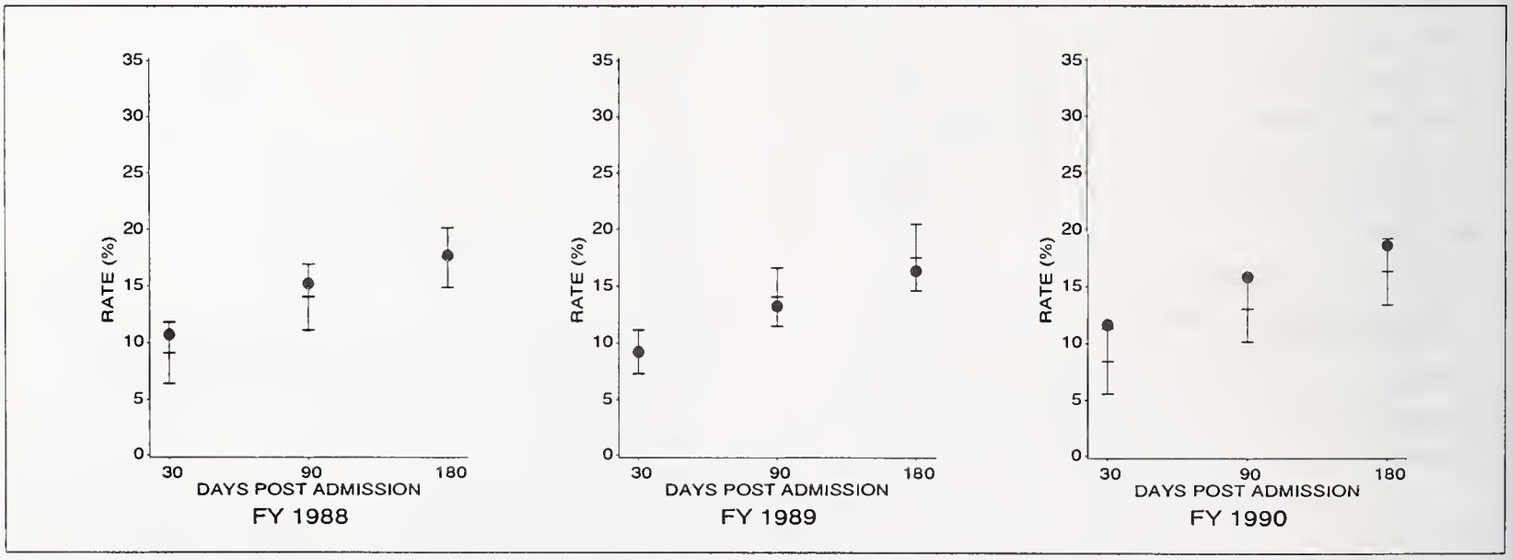
HARRIS DRIVE, BOX 1449
KILMARNOCK, VA 22482
Medicare Provider Number: 490123

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	993	11.6	8.4	1.4	15.8	13.0	1.4	18.6	16.3	1.5
CONDITIONS:										
Acute Myocardial Infarction	22	22.7	25.7	-----	31.8	28.6	-----	31.8	30.9	-----
Congestive Heart Failure	67	19.4	13.2	6.8	28.4	21.3	10.3	32.8	27.3	11.0
Pneumonia/Influenza	44	25.0	13.1	-----	27.3	18.1	-----	31.8	21.7	-----
Chronic Obstructive Pulmonary Disease	17	0.0	4.7	-----	0.0	9.1	-----	17.6	12.8	-----
Transient Cerebral Ischemia	23	4.3	1.6	-----	13.0	3.9	-----	13.0	6.6	-----
Stroke	61	19.7	20.5	5.2	27.9	26.5	6.1	31.1	30.1	6.2
Hip Fracture	49	6.1	5.0	-----	10.2	9.4	-----	10.2	12.7	-----
Sepsis	7	28.6	34.3	-----	28.6	44.5	-----	42.9	49.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	3.6	-----	0.0	7.1	-----	0.0	9.8	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	31	3.2	2.5	-----	6.5	4.8	-----	9.7	6.6	-----
Open Reduction of Hip Fracture	25	4.0	4.5	-----	8.0	9.0	-----	8.0	12.7	-----
Prostatectomy	13	0.0	0.5	-----	0.0	1.3	-----	7.7	2.3	-----
Cholecystectomy	27	0.0	1.4	-----	3.7	2.4	-----	3.7	3.2	-----
Hysterectomy	4	0.0	0.5	-----	0.0	1.2	-----	0.0	1.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RAPPAHANNOCK GENERAL HOSPITAL
Medicare Provider Number: 490123

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.3 years
Proportion female	55.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	25.5 %
Admitted for emergency	72.6 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	28.0 %
Chronic liver disease	0.8 %
Chronic renal disease	0.7 %
Chronic pulmonary disease	12.5 %
Cerebrovascular degeneration	5.6 %
Diabetes mellitus	8.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	37.9%
State	59.3%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.4 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	76
Occupancy Rate	51.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	55.3 %
Case Mix Index (CMI)	1.0920

STAFFING:

Total Number of Physicians	27
Percent of Physicians Board Certified Specialists	96.3 %
Medical Residents/Interns	0
Registered Nurses	65
Licensed Practical Nurses	12

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

RESTON HOSPITAL CENTER

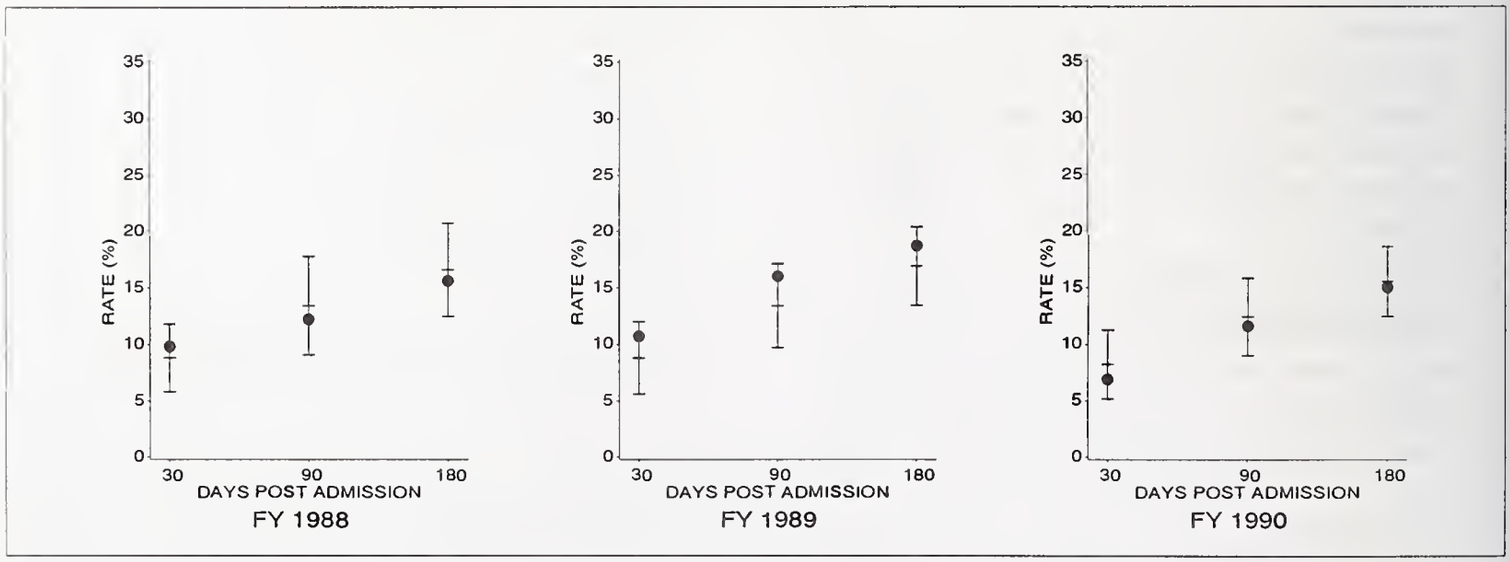
1850 TOWN CENTER PKWY, BOX 3220
RESTON, VA 22090
Medicare Provider Number: 490107

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	713	6.9	8.2	1.5	11.6	12.4	1.7	15.0	15.5	1.6
CONDITIONS:										
Acute Myocardial Infarction	23	8.7	24.3	-----	21.7	28.1	-----	26.1	30.9	-----
Congestive Heart Failure	32	6.3	15.4	-----	25.0	24.4	-----	31.3	30.4	-----
Pneumonia/Influenza	30	10.0	14.3	-----	13.3	19.5	-----	13.3	23.2	-----
Chronic Obstructive Pulmonary Disease	18	5.6	8.0	-----	11.1	13.6	-----	22.2	18.3	-----
Transient Cerebral Ischemia	16	0.0	1.6	-----	0.0	3.8	-----	6.3	6.4	-----
Stroke	27	44.4	30.3	-----	48.1	36.6	-----	48.1	40.3	-----
Hip Fracture	24	4.2	5.1	-----	4.2	9.4	-----	4.2	12.6	-----
Sepsis	15	6.7	29.2	-----	33.3	39.4	-----	40.0	44.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	7	0.0	6.4	-----	14.3	10.9	-----	42.9	14.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	17	0.0	3.3	-----	0.0	6.2	-----	0.0	8.3	-----
Open Reduction of Hip Fracture	13	7.7	4.0	-----	7.7	7.8	-----	7.7	11.0	-----
Prostatectomy	13	0.0	0.4	-----	0.0	0.9	-----	0.0	1.5	-----
Cholecystectomy	11	0.0	1.5	-----	0.0	2.5	-----	0.0	3.3	-----
Hysterectomy	2	0.0	0.2	-----	0.0	0.5	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RESTON HOSPITAL CENTER

Medicare Provider Number: 490107

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.8 years
Proportion female	65.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.9 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	16.1 %
Admitted for emergency	58.4 %

COMORBIDITIES:

Cancer	4.9 %
Chronic cardiovascular disease	27.0 %
Chronic liver disease	0.7 %
Chronic renal disease	2.7 %
Chronic pulmonary disease	11.3 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	1.3%
State	83.5%
Outside State	15.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	135
Occupancy Rate	63.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	18.5 %
Case Mix Index (CMI)	1.1576

STAFFING:

Total Number of Physicians	306
Percent of Physicians Board Certified Specialists	80.1 %
Medical Residents/Interns	0
Registered Nurses	145
Licensed Practical Nurses	3

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

RETREAT HOSPITAL

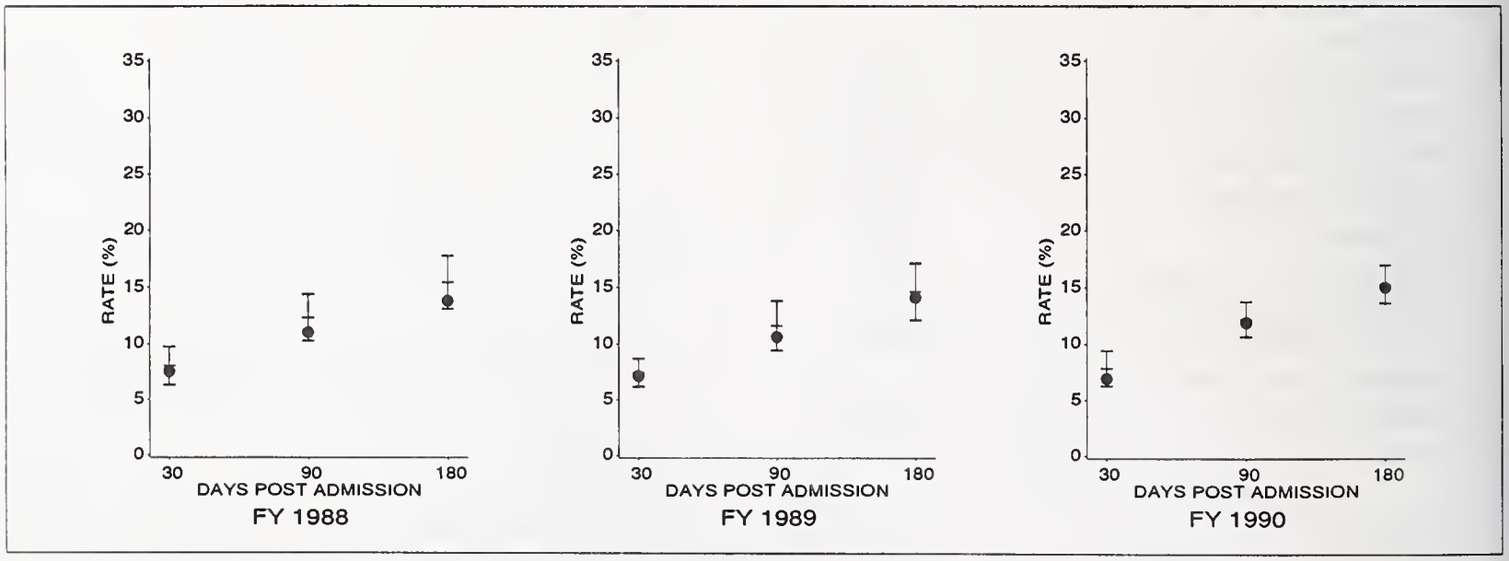
2621 GROVE AVE
RICHMOND, VA 23220
Medicare Provider Number: 490071

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1975	6.9	7.8	0.8	11.9	12.2	0.8	15.0	15.3	0.8
CONDITIONS:										
Acute Myocardial Infarction	45	28.9	29.5	-----	35.6	33.1	-----	37.8	36.1	-----
Congestive Heart Failure	77	13.0	13.7	4.1	18.2	21.8	6.2	24.7	28.0	7.1
Pneumonia/Influenza	49	8.2	15.0	-----	16.3	21.0	-----	18.4	24.8	-----
Chronic Obstructive Pulmonary Disease	33	12.1	5.7	-----	15.2	11.2	-----	27.3	15.9	-----
Transient Cerebral Ischemia	41	0.0	1.2	-----	0.0	2.8	-----	0.0	4.8	-----
Stroke	66	18.2	20.6	6.8	25.8	27.8	5.8	30.3	31.9	6.0
Hip Fracture	41	2.4	5.6	-----	7.3	9.8	-----	14.6	12.7	-----
Sepsis	18	38.9	24.3	-----	50.0	31.0	-----	50.0	35.3	-----
PROCEDURES:										
Angioplasty	3	0.0	3.3	-----	0.0	4.4	-----	0.0	5.7	-----
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	21	0.0	3.2	-----	9.5	6.4	-----	9.5	9.3	-----
Carotid Endarterectomy	19	0.0	1.6	-----	5.3	3.1	-----	5.3	4.5	-----
Hip Replacement/Reconstruction	33	3.0	2.6	-----	3.0	4.8	-----	6.1	6.5	-----
Open Reduction of Hip Fracture	15	0.0	6.4	-----	13.3	10.8	-----	26.7	13.9	-----
Prostatectomy	53	0.0	0.6	-----	0.0	1.5	-----	0.0	2.6	-----
Cholecystectomy	27	11.1	3.0	-----	11.1	5.9	-----	11.1	8.1	-----
Hysterectomy	13	0.0	0.4	-----	7.7	1.1	-----	7.7	2.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RETREAT HOSPITAL
Medicare Provider Number: 490071

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.4 years
Proportion female	61.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	52.6 %
Transferred from skilled nursing facility	1.6 %
Admitted for elective procedure	30.2 %
Admitted for emergency	46.1 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	31.2 %
Chronic liver disease	0.9 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	15.5 %
Cerebrovascular degeneration	2.8 %
Diabetes mellitus	5.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	51.2%
State	47.3%
Outside State	1.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	143
Occupancy Rate	63.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	61.7 %
Case Mix Index (CMI)	1.2577

STAFFING:

Total Number of Physicians	141
Percent of Physicians Board Certified Specialists	85.1 %
Medical Residents/Interns	0
Registered Nurses	100
Licensed Practical Nurses	55

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

RICHMOND COMMUNITY HOSPITAL

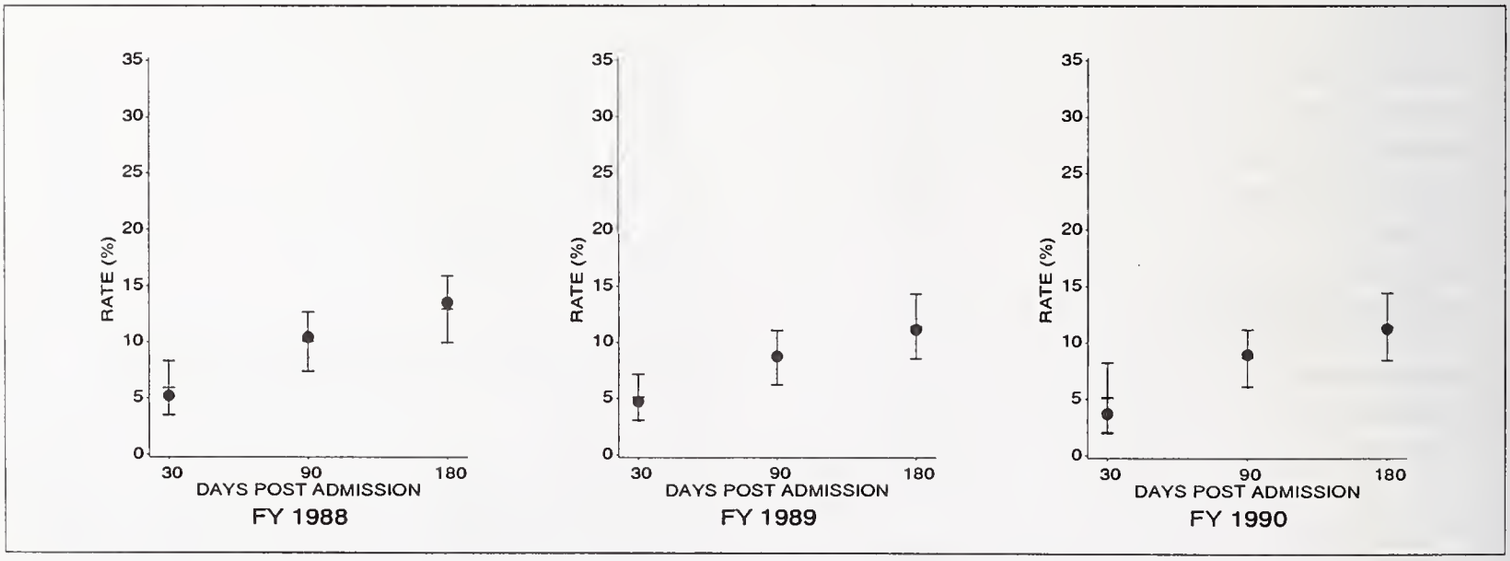
1500 N 28TH ST
RICHMOND, VA 23223
Medicare Provider Number: 490094

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	508	3.7	5.1	1.5	8.9	8.6	1.3	11.2	11.4	1.5
CONDITIONS:										
Acute Myocardial Infarction	9	33.3	23.0	-----	33.3	26.2	-----	33.3	29.5	-----
Congestive Heart Failure	24	8.3	10.4	-----	12.5	17.1	-----	20.8	23.0	-----
Pneumonia/Influenza	5	0.0	9.6	-----	20.0	15.4	-----	20.0	19.3	-----
Chronic Obstructive Pulmonary Disease	5	20.0	6.9	-----	20.0	13.4	-----	20.0	18.2	-----
Transient Cerebral Ischemia	11	0.0	1.2	-----	9.1	2.8	-----	9.1	4.7	-----
Stroke	13	7.7	13.7	-----	15.4	18.0	-----	15.4	20.9	-----
Hip Fracture	0									
Sepsis	10	30.0	17.6	-----	50.0	25.6	-----	50.0	30.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	1.7	-----	0.0	4.0	-----	0.0	6.7	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	9	0.0	1.6	-----	0.0	3.8	-----	0.0	6.3	-----
Cholecystectomy	6	0.0	1.6	-----	0.0	3.0	-----	0.0	3.9	-----
Hysterectomy	1	0.0	0.0	-----	0.0	0.1	-----	0.0	0.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RICHMOND COMMUNITY HOSPITAL

Medicare Provider Number: 490094

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	66.9 years
Proportion female	59.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	95.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	2.4 %

COMORBIDITIES:

Cancer	2.8 %
Chronic cardiovascular disease	15.7 %
Chronic liver disease	0.4 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	5.9 %
Diabetes mellitus	8.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	77.8%
State	20.4%
Outside State	1.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	87
Occupancy Rate	56.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.0961

STAFFING:

Total Number of Physicians	71
Percent of Physicians Board Certified Specialists	64.8 %
Medical Residents/Interns	0
Registered Nurses	34
Licensed Practical Nurses	18

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

RICHMOND EYE AND EAR HOSPITAL

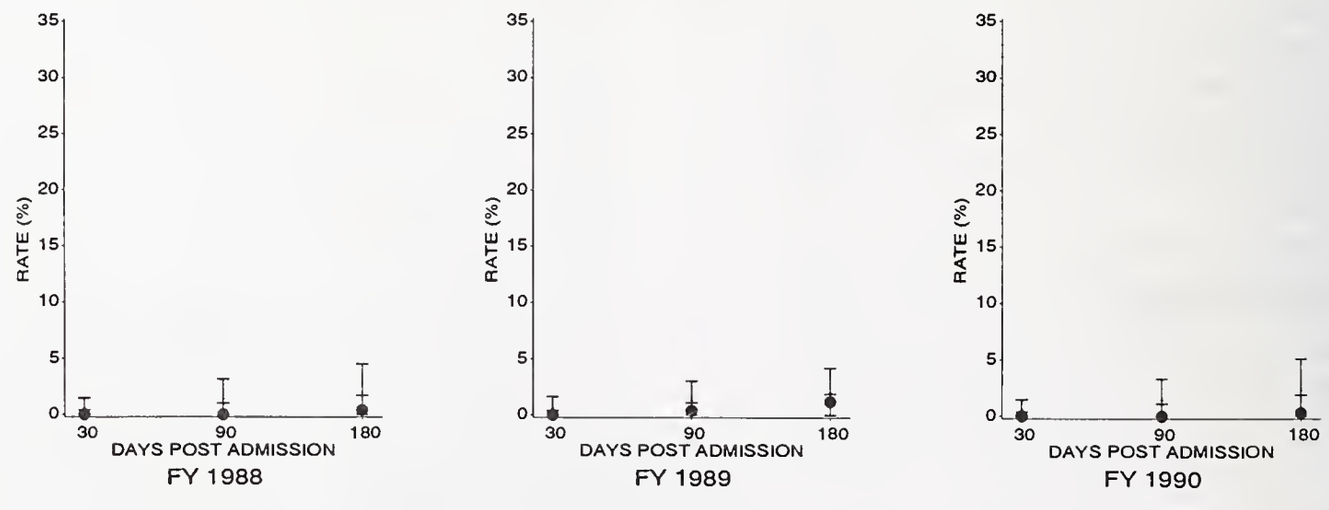
1001 E MARSHALL ST
RICHMOND, VA 23219
Medicare Provider Number: 490003

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	314	0.0	0.4	0.5	0.0	1.1	1.1	0.3	1.9	1.6
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	0									
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RICHMOND EYE AND EAR HOSPITAL

Medicare Provider Number: 490003

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	
Average age at admission	73.3 years
Proportion female	64.0 %
ADMISSION SOURCES/TYPES:	
Referred by personal or HMO physician	95.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	94.6 %
Admitted for emergency	1.0 %

COMORBIDITIES:	
Cancer	0.3 %
Chronic cardiovascular disease	6.4 %
Chronic liver disease	0.0 %
Chronic renal disease	0.3 %
Chronic pulmonary disease	3.5 %
Cerebrovascular degeneration	0.6 %
Diabetes mellitus	6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	
County/City	36.0%
State	61.5%
Outside State	2.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:	
Hospital	2.4 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:	
Total Beds	60
Occupancy Rate	13.3 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	6.5 %
Case Mix Index (CMI)	0.6214
STAFFING:	
Total Number of Physicians	80
Percent of Physicians Board Certified Specialists	83.8 %
Medical Residents/Interns	0
Registered Nurses	28
Licensed Practical Nurses	9

SPECIALTY SERVICES:	
Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

RICHMOND MEMORIAL HOSPITAL

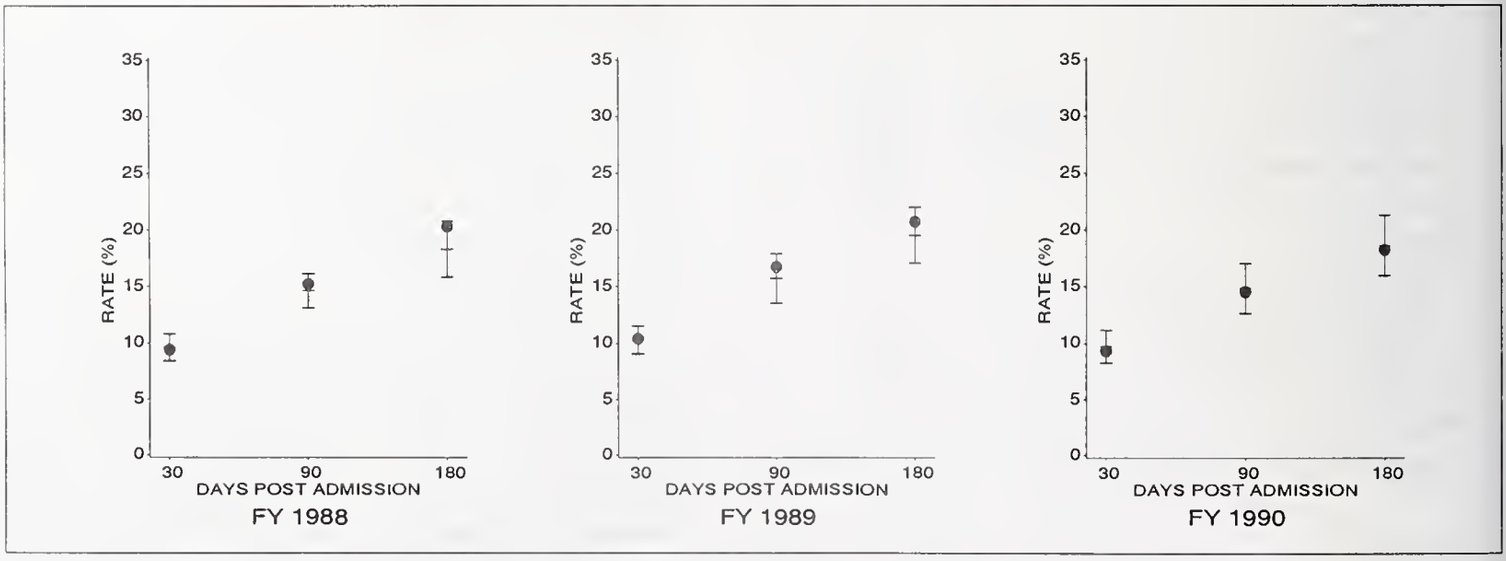
1300 WESTWOOD AVE
RICHMOND, VA 23227
Medicare Provider Number: 490069

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2702	9.3	9.7	0.7	14.5	14.8	1.1	18.2	18.6	1.3
CONDITIONS:										
Acute Myocardial Infarction	73	16.4	29.5	7.0	17.8	32.8	7.6	19.2	35.6	8.0
Congestive Heart Failure	136	9.6	14.6	4.2	18.4	23.3	4.8	24.3	29.6	5.6
Pneumonia/Influenza	82	20.7	15.8	4.4	23.2	21.7	4.8	25.6	25.5	5.4
Chronic Obstructive Pulmonary Disease	34	2.9	7.1	-----	5.9	13.3	-----	8.8	18.4	-----
Transient Cerebral Ischemia	60	0.0	1.2	1.9	0.0	3.0	3.6	1.7	5.0	4.2
Stroke	151	15.2	18.6	4.0	27.2	24.9	3.8	30.5	28.8	4.1
Hip Fracture	83	8.4	5.7	4.4	14.5	10.2	5.0	15.7	13.5	4.3
Sepsis	56	21.4	24.4	7.4	32.1	32.3	7.7	39.3	36.7	8.1
PROCEDURES:										
Angioplasty	31	0.0	3.3	-----	0.0	4.4	-----	0.0	5.4	-----
Coronary Artery Bypass Graft	30	0.0	7.1	-----	3.3	9.9	-----	3.3	11.0	-----
Initial Pacemaker Insertion	29	0.0	4.8	-----	0.0	8.3	-----	0.0	11.0	-----
Carotid Endarterectomy	1	0.0	1.1	-----	0.0	2.1	-----	0.0	3.0	-----
Hip Replacement/Reconstruction	34	5.9	3.6	-----	11.8	6.6	-----	11.8	9.0	-----
Open Reduction of Hip Fracture	35	8.6	5.5	-----	17.1	10.4	-----	17.1	14.1	-----
Prostatectomy	46	2.2	1.4	-----	4.3	3.5	-----	6.5	6.1	-----
Cholecystectomy	44	2.3	1.6	-----	2.3	2.7	-----	4.5	3.6	-----
Hysterectomy	15	0.0	0.6	-----	6.7	1.3	-----	6.7	2.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RICHMOND MEMORIAL HOSPITAL

Medicare Provider Number: 490069

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.4 years
Proportion female	59.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	41.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	15.0 %
Admitted for emergency	13.7 %

COMORBIDITIES:

Cancer	7.9 %
Chronic cardiovascular disease	32.3 %
Chronic liver disease	1.4 %
Chronic renal disease	5.3 %
Chronic pulmonary disease	13.5 %
Cerebrovascular degeneration	5.5 %
Diabetes mellitus	9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	47.9%
State	50.4%
Outside State	1.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	420
Ownership.Control	Private, Non-Profit
Case Mix Index (CMI)	1.3060

STAFFING:

Medical Residents/Interns	27
Registered Nurses	220
Licensed Practical Nurses	77

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

RIVERSIDE HOSPITAL

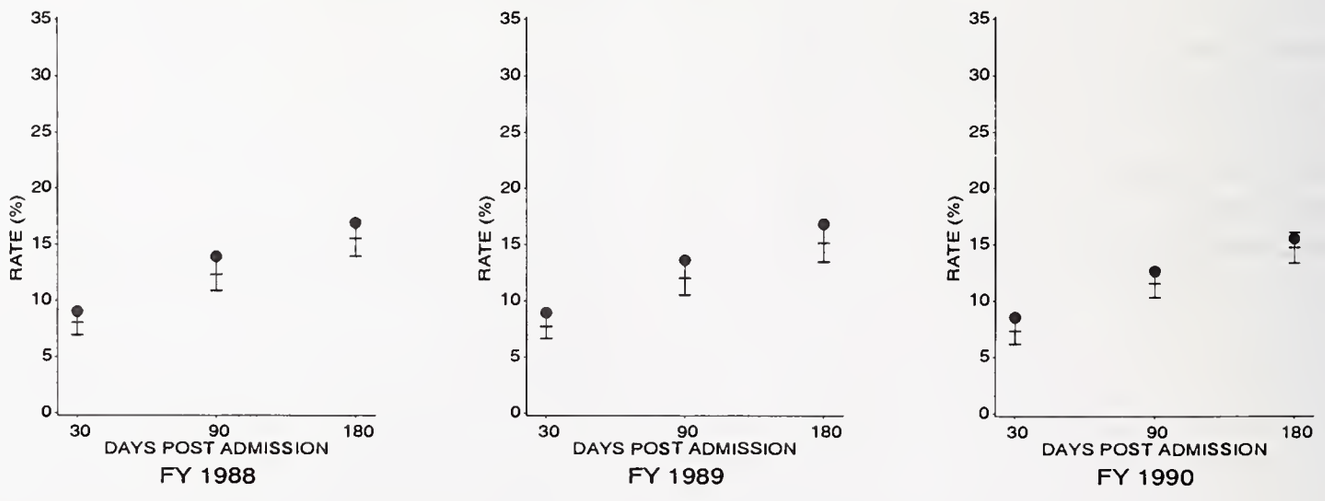
500 J CLYDE MORRIS BLVD
NEWPORT NEWS, VA 23601
Medicare Provider Number: 490052

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	4233	8.5	7.3	0.6	12.6	11.5	0.6	15.5	14.7	0.7
CONDITIONS:										
Acute Myocardial Infarction	133	23.3	21.3	4.0	27.1	24.4	4.2	29.3	27.1	4.5
Congestive Heart Failure	174	11.5	13.1	2.7	24.1	19.9	3.6	28.2	25.5	3.6
Pneumonia/Influenza	121	16.5	13.9	4.7	21.5	19.2	4.0	24.0	22.9	3.9
Chronic Obstructive Pulmonary Disease	61	13.1	7.2	4.7	18.0	12.7	6.4	26.2	17.1	7.6
Transient Cerebral Ischemia	56	0.0	1.1	1.8	0.0	2.7	3.3	1.8	4.5	3.6
Stroke	157	17.2	17.7	4.1	22.9	24.1	3.6	26.1	27.7	4.5
Hip Fracture	73	5.5	5.3	2.7	8.2	9.7	4.7	9.6	12.8	5.1
Sepsis	33	27.3	21.9	-----	27.3	30.5	-----	27.3	35.5	-----
PROCEDURES:										
Angioplasty	85	3.5	2.7	1.9	3.5	3.5	2.0	3.5	4.3	2.3
Coronary Artery Bypass Graft	134	6.0	4.4	2.2	7.5	6.3	2.3	8.2	7.1	2.6
Initial Pacemaker Insertion	29	10.3	4.1	-----	10.3	7.6	-----	10.3	10.6	-----
Carotid Endarterectomy	17	0.0	0.9	-----	0.0	1.7	-----	0.0	2.4	-----
Hip Replacement/Reconstruction	66	4.5	3.0	2.4	6.1	5.7	3.5	6.1	7.5	4.0
Open Reduction of Hip Fracture	27	7.4	4.6	-----	11.1	8.7	-----	14.8	11.7	-----
Prostatectomy	97	0.0	0.6	0.9	1.0	1.4	1.2	2.1	2.5	1.6
Cholecystectomy	64	0.0	1.8	2.4	0.0	3.4	3.8	0.0	4.6	4.9
Hysterectomy	36	2.8	0.2	-----	2.8	0.5	-----	2.8	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RIVERSIDE HOSPITAL
Medicare Provider Number: 490052

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.6 years
Proportion female	55.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	52.5 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	40.2 %
Admitted for emergency	18.9 %

COMORBIDITIES:

Cancer	8.1 %
Chronic cardiovascular disease	27.1 %
Chronic liver disease	0.9 %
Chronic renal disease	4.2 %
Chronic pulmonary disease	9.5 %
Cerebrovascular degeneration	3.1 %
Diabetes mellitus	7.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	49.8%
State	47.5%
Outside State	2.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	576
Occupancy Rate	62.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	33.9 %
Case Mix Index (CMI)	1.3907

STAFFING:

Total Number of Physicians	236
Percent of Physicians Board Certified Specialists	95.8 %
Medical Residents/Interns	55
Registered Nurses	429
Licensed Practical Nurses	118

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

RIVERSIDE TAPPAHANNOCK HOSPITAL INC

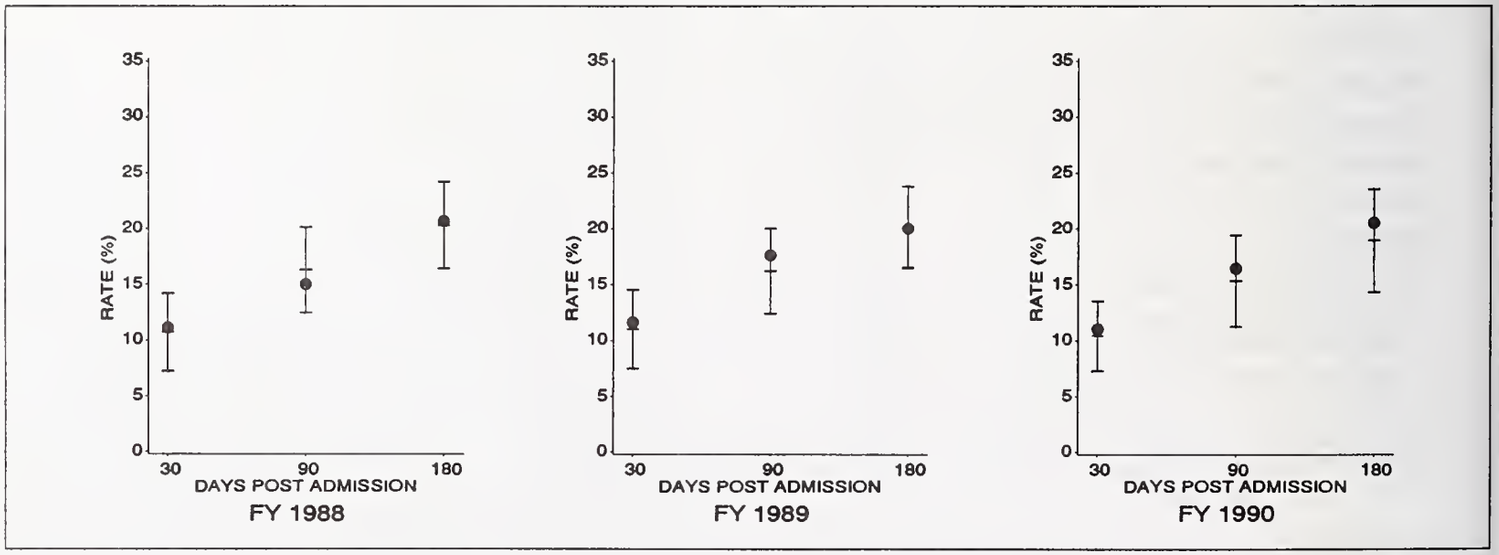
ROUTE 2, BOX 256
TAPPAHANNOCK, VA 22560
Medicare Provider Number: 490084

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	464	11.0	10.4	1.6	16.4	15.3	2.0	20.5	18.9	2.3
CONDITIONS:										
Acute Myocardial Infarction	28	28.6	26.8	-----	28.6	30.0	-----	32.1	32.3	-----
Congestive Heart Failure	34	14.7	13.9	-----	23.5	22.3	-----	35.3	28.1	-----
Pneumonia/Influenza	30	10.0	13.9	-----	23.3	19.3	-----	26.7	23.4	-----
Chronic Obstructive Pulmonary Disease	3	0.0	8.4	-----	0.0	13.9	-----	0.0	17.0	-----
Transient Cerebral Ischemia	9	11.1	2.2	-----	11.1	4.9	-----	22.2	8.1	-----
Stroke	28	21.4	19.9	-----	21.4	26.6	-----	35.7	31.0	-----
Hip Fracture	19	0.0	4.2	-----	10.5	7.9	-----	10.5	10.8	-----
Sepsis	11	27.3	27.5	-----	45.5	38.3	-----	45.5	43.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	1.7	-----	0.0	3.6	-----	20.0	5.9	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	3	0.0	2.0	-----	0.0	3.6	-----	0.0	5.4	-----
Open Reduction of Hip Fracture	10	0.0	4.1	-----	0.0	7.9	-----	0.0	10.8	-----
Prostatectomy	5	0.0	0.6	-----	0.0	1.3	-----	0.0	2.2	-----
Cholecystectomy	1	100.0	3.6	-----	100.0	5.5	-----	100.0	6.4	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RIVERSIDE TAPPAHANNOCK HOSPITAL INC

Medicare Provider Number: 490084

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.1 years
Proportion female	58.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	29.5 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	27.6 %
Admitted for emergency	39.4 %

COMORBIDITIES:

Cancer	2.8 %
Chronic cardiovascular disease	40.3 %
Chronic liver disease	1.7 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	14.2 %
Cerebrovascular degeneration	9.1 %
Diabetes mellitus	7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	33.2%
State	64.6%
Outside State	2.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.7 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	61
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	65.8 %
Case Mix Index (CMI)	1.1128

STAFFING:

Total Number of Physicians	17
Percent of Physicians Board Certified Specialists	70.6 %
Medical Residents/Interns	0
Registered Nurses	35
Licensed Practical Nurses	11

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

RIVERSIDE WALTER REED HOSPITAL

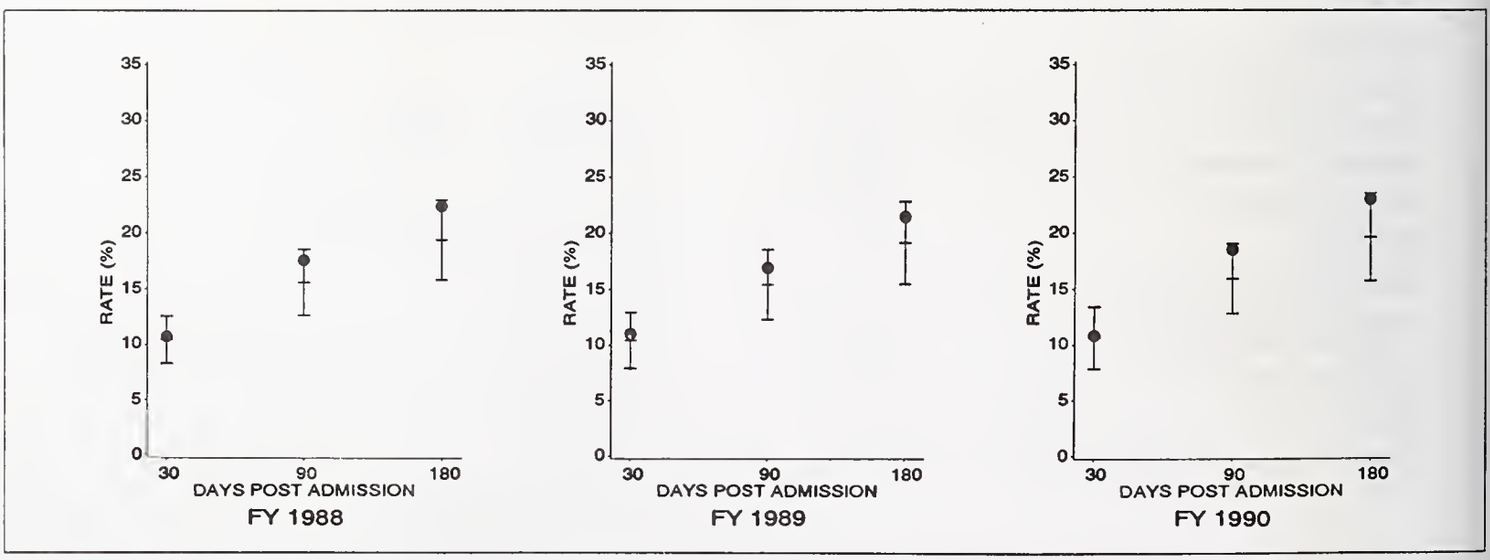
ROUTE 17, BOX 1130
GLOUCESTER, VA 23061
Medicare Provider Number: 490130

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	823	10.8	10.6	1.4	18.5	15.9	1.6	23.0	19.6	1.9
CONDITIONS:										
Acute Myocardial Infarction	40	25.0	25.9	-----	35.0	28.8	-----	42.5	31.7	-----
Congestive Heart Failure	42	19.0	16.7	-----	40.5	26.8	-----	45.2	33.6	-----
Pneumonia/Influenza	40	35.0	15.6	-----	37.5	21.9	-----	40.0	26.1	-----
Chronic Obstructive Pulmonary Disease	17	5.9	7.5	-----	23.5	13.0	-----	23.5	17.2	-----
Transient Cerebral Ischemia	8	0.0	3.0	-----	0.0	6.3	-----	12.5	9.8	-----
Stroke	25	24.0	20.5	-----	36.0	28.6	-----	44.0	32.8	-----
Hip Fracture	24	0.0	6.9	-----	8.3	12.3	-----	20.8	16.4	-----
Sepsis	20	10.0	28.2	-----	30.0	35.4	-----	30.0	39.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	12	0.0	6.1	-----	8.3	11.7	-----	16.7	16.1	-----
Open Reduction of Hip Fracture	10	0.0	6.2	-----	10.0	10.9	-----	10.0	14.2	-----
Prostatectomy	15	0.0	0.7	-----	6.7	1.6	-----	13.3	2.8	-----
Cholecystectomy	8	12.5	1.9	-----	12.5	4.4	-----	25.0	7.1	-----
Hysterectomy	8	0.0	0.3	-----	0.0	0.8	-----	0.0	1.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RIVERSIDE WALTER REED HOSPITAL
Medicare Provider Number: 490130

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.0 years
Proportion female	57.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	32.3 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	24.8 %
Admitted for emergency	65.7 %

COMORBIDITIES:

Cancer	8.6 %
Chronic cardiovascular disease	30.1 %
Chronic liver disease	1.5 %
Chronic renal disease	5.2 %
Chronic pulmonary disease	14.2 %
Cerebrovascular degeneration	2.7 %
Diabetes mellitus	5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	48.3%
State	50.0%
Outside State	1.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	71
Occupancy Rate	64.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	61.7 %
Case Mix Index (CMI)	1.1889

STAFFING:

Total Number of Physicians	19
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	49
Licensed Practical Nurses	17

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ROANOKE MEMORIAL HOSPITALS

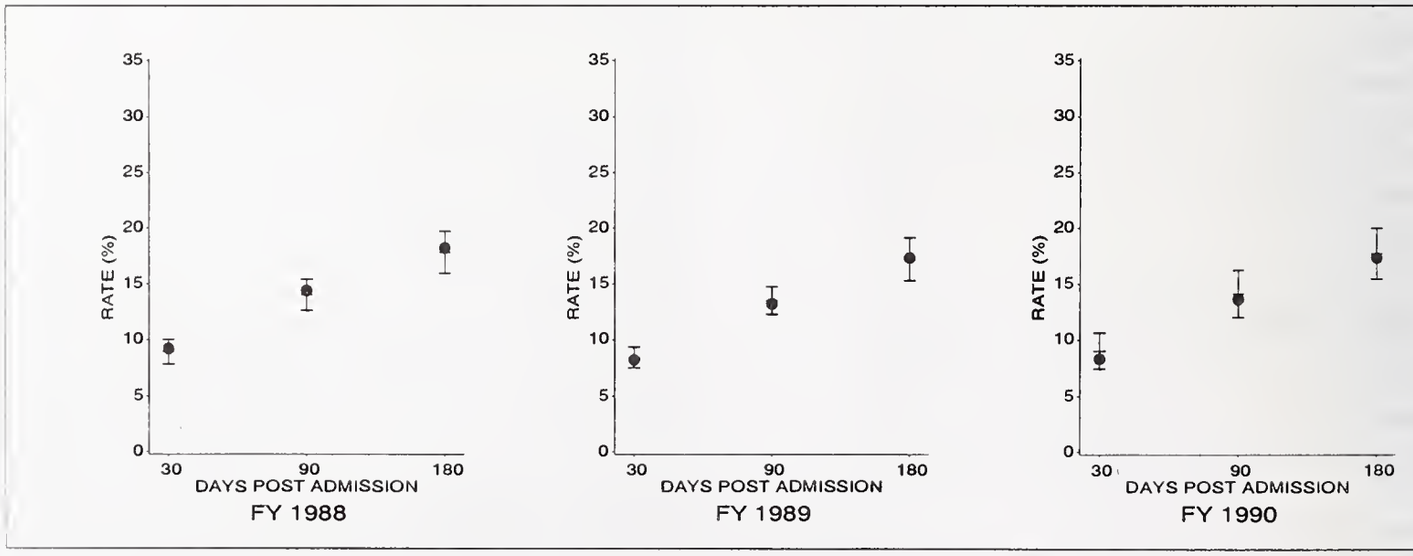
BELLEVIEW & JEFFERSON STS
ROANOKE, VA 24033
Medicare Provider Number: 490024

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4410	8.3	9.0	0.8	13.6	14.1	1.1	17.3	17.7	1.1
CONDITIONS:										
Acute Myocardial Infarction	123	22.0	28.9	7.9	26.0	31.8	7.9	29.3	34.6	8.4
Congestive Heart Failure	163	17.8	13.5	3.5	25.2	21.8	3.7	32.5	27.8	4.3
Pneumonia/Influenza	139	7.2	13.0	4.1	12.9	18.2	4.2	19.4	21.6	3.7
Chronic Obstructive Pulmonary Disease	28	7.1	6.6	-----	17.9	12.4	-----	21.4	17.0	-----
Transient Cerebral Ischemia	50	0.0	1.4	-----	4.0	3.0	-----	6.0	4.7	-----
Stroke	160	15.6	20.2	5.0	24.4	26.6	4.0	30.6	30.4	3.6
Hip Fracture	106	4.7	5.8	2.5	9.4	10.5	3.1	13.2	13.8	3.4
Sepsis	59	22.0	24.0	6.4	28.8	31.5	7.0	33.9	36.2	6.3
PROCEDURES:										
Angioplasty	59	0.0	2.9	3.8	1.7	3.6	3.7	3.4	4.4	3.9
Coronary Artery Bypass Graft	174	4.6	5.6	3.0	6.9	8.4	3.7	6.9	9.6	3.7
Initial Pacemaker Insertion	30	0.0	3.2	-----	0.0	6.7	-----	3.3	9.9	-----
Carotid Endarterectomy	26	0.0	1.8	-----	3.8	3.3	-----	3.8	5.0	-----
Hip Replacement/Reconstruction	71	2.8	3.8	3.1	4.2	7.0	4.2	7.0	9.5	4.3
Open Reduction of Hip Fracture	40	7.5	5.7	-----	17.5	10.7	-----	20.0	14.2	-----
Prostatectomy	116	1.7	1.0	1.2	1.7	2.3	1.5	4.3	3.8	2.3
Cholecystectomy	86	3.5	2.7	2.4	7.0	4.9	3.3	8.1	6.4	3.9
Hysterectomy	33	0.0	0.7	-----	0.0	1.5	-----	0.0	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ROANOKE MEMORIAL HOSPITALS

Medicare Provider Number: 490024

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.8 years
Proportion female	56.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	52.8 %
Transferred from skilled nursing facility	1.0 %
Admitted for elective procedure	18.7 %
Admitted for emergency	26.7 %

COMORBIDITIES:

Cancer	10.1 %
Chronic cardiovascular disease	35.2 %
Chronic liver disease	1.0 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	11.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	40.3%
State	52.8%
Outside State	6.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	623
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.8 %
Case Mix Index (CMI)	1.5799

STAFFING:

Total Number of Physicians	279
Percent of Physicians Board Certified Specialists	79.9 %
Medical Residents/Interns	84
Registered Nurses	490
Licensed Practical Nurses	205

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ROCKINGHAM MEMORIAL HOSPITAL

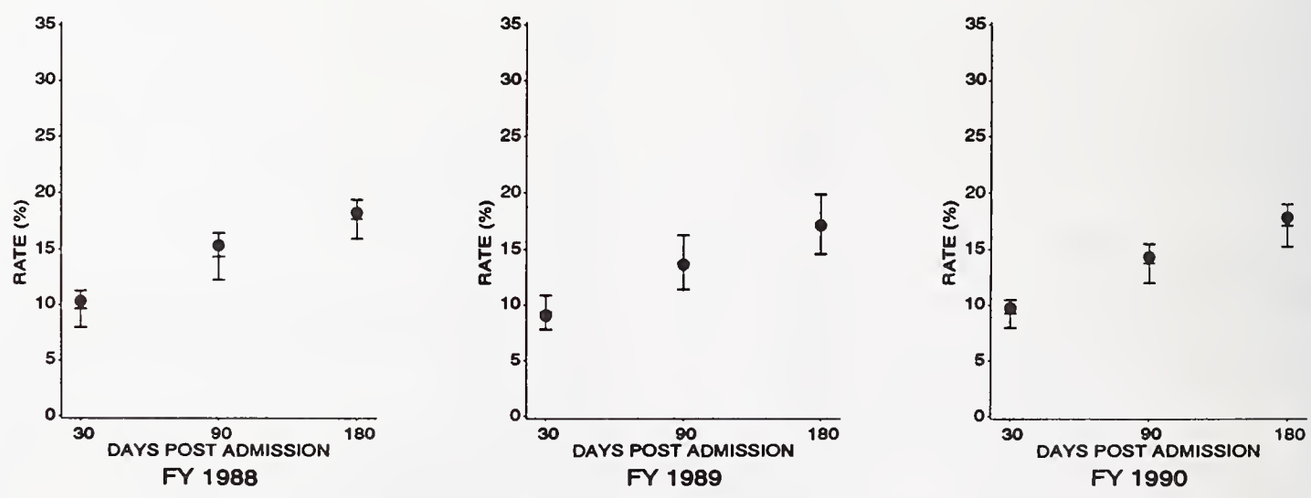
235 CANTRELL AVE
HARRISONBURG, VA 22801
Medicare Provider Number: 490004

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2670	9.7	9.2	0.6	14.3	13.7	0.9	17.8	17.1	0.9
CONDITIONS:										
Acute Myocardial Infarction	62	29.0	28.7	5.8	35.5	31.3	6.8	37.1	34.2	7.6
Congestive Heart Failure	124	9.7	15.2	4.9	21.0	24.0	4.9	27.4	30.2	5.2
Pneumonia/Influenza	173	9.2	14.8	4.2	17.9	20.2	4.0	22.0	24.0	3.8
Chronic Obstructive Pulmonary Disease	29	13.8	8.3	-----	17.2	14.4	-----	17.2	19.0	-----
Transient Cerebral Ischemia	33	0.0	2.1	-----	0.0	4.9	-----	3.0	7.9	-----
Stroke	107	25.2	17.5	5.0	26.2	23.5	4.5	28.0	27.2	5.0
Hip Fracture	75	8.0	5.2	5.4	13.3	9.3	4.6	14.7	12.3	4.4
Sepsis	29	17.2	25.0	-----	34.5	32.6	-----	34.5	37.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	18	0.0	2.9	-----	0.0	5.4	-----	0.0	8.1	-----
Carotid Endarterectomy	7	14.3	0.9	-----	14.3	1.7	-----	14.3	2.6	-----
Hip Replacement/Reconstruction	33	3.0	2.6	-----	6.1	5.0	-----	6.1	6.7	-----
Open Reduction of Hip Fracture	46	6.5	4.5	-----	13.0	8.4	-----	15.2	11.5	-----
Prostatectomy	87	0.0	0.8	1.4	2.3	2.1	1.8	5.7	3.6	2.8
Cholecystectomy	51	7.8	1.8	4.4	7.8	3.3	4.7	9.8	4.6	4.9
Hysterectomy	37	0.0	0.3	-----	0.0	0.7	-----	0.0	1.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ROCKINGHAM MEMORIAL HOSPITAL

Medicare Provider Number: 490004

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	54.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	24.7 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	27.2 %
Admitted for emergency	11.7 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	24.8 %
Chronic liver disease	1.0 %
Chronic renal disease	6.7 %
Chronic pulmonary disease	10.0 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	23.0%
State	68.1%
Outside State	8.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	255
Occupancy Rate	69.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	32.8 %
Case Mix index (CMI)	1.1545

STAFFING:

Total Number of Physicians	118
Percent of Physicians Board Certified Specialists	87.3 %
Medical Residents/Interns	0
Registered Nurses	262
Licensed Practical Nurses	92

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

RUSSELL COUNTY MEDICAL CENTER

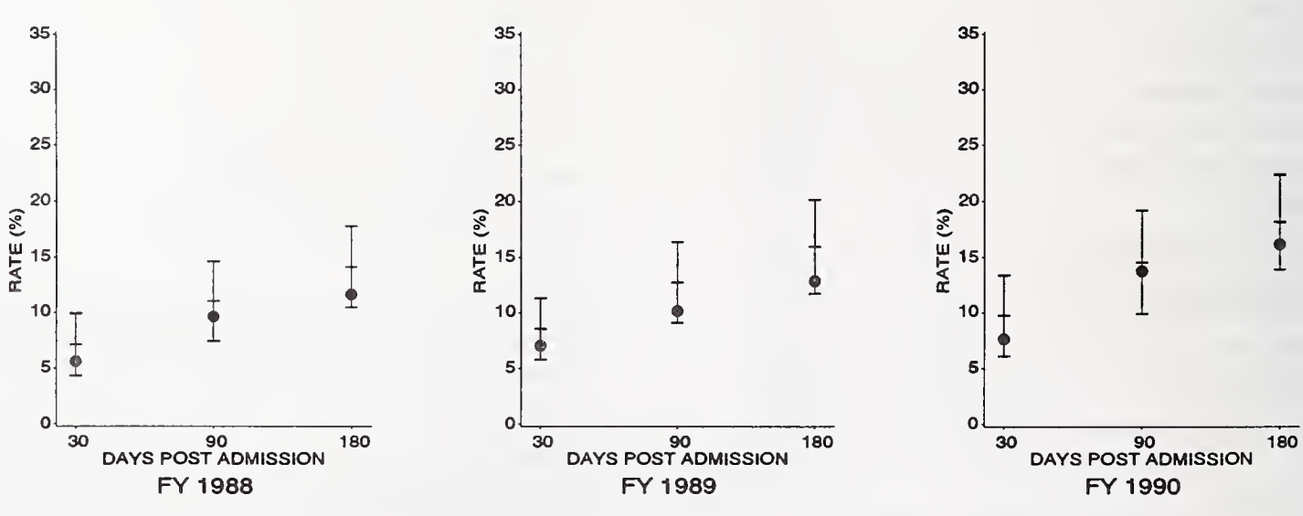
CARROL & TATE STS
LEBANON, VA 24266
Medicare Provider Number: 490002

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	700	7.6	9.7	1.8	13.7	14.5	2.3	16.1	18.1	2.1
CONDITIONS:										
Acute Myocardial Infarction	40	22.5	32.0	-----	25.0	35.3	-----	27.5	38.6	-----
Congestive Heart Failure	35	8.6	16.2	-----	22.9	25.6	-----	25.7	31.6	-----
Pneumonia/Influenza	44	11.4	11.9	-----	15.9	16.9	-----	20.5	20.8	-----
Chronic Obstructive Pulmonary Disease	79	5.1	5.8	4.1	7.6	10.9	6.6	11.4	15.2	7.7
Transient Cerebral Ischemia	7	0.0	1.9	-----	0.0	4.1	-----	0.0	6.6	-----
Stroke	18	11.1	23.4	-----	27.8	28.7	-----	27.8	32.5	-----
Hip Fracture	13	7.7	10.8	-----	15.4	17.5	-----	15.4	21.3	-----
Sepsis	9	33.3	23.5	-----	44.4	33.5	-----	44.4	38.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	0.0	4.8	-----	0.0	8.7	-----	0.0	11.5	-----
Open Reduction of Hip Fracture	9	11.1	11.9	-----	22.2	19.6	-----	22.2	24.0	-----
Prostatectomy	1	0.0	0.2	-----	0.0	0.5	-----	0.0	0.9	-----
Cholecystectomy	9	11.1	1.7	-----	11.1	3.1	-----	11.1	4.3	-----
Hysterectomy	3	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RUSSELL COUNTY MEDICAL CENTER

Medicare Provider Number: 490002

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.7 years
Proportion female	54.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	4.7 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	4.3 %
Admitted for emergency	60.6 %

COMORBIDITIES:

Cancer	4.0 %
Chronic cardiovascular disease	38.3 %
Chronic liver disease	0.3 %
Chronic renal disease	1.6 %
Chronic pulmonary disease	50.3 %
Cerebrovascular degeneration	5.6 %
Diabetes mellitus	10.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	79.0%
State	19.5%
Outside State	1.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	78
Occupancy Rate	65.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.0604

STAFFING:

Total Number of Physicians	28
Percent of Physicians Board Certified Specialists	67.9 %
Medical Residents/Interns	0
Registered Nurses	48
Licensed Practical Nurses	31

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SENTARA HAMPTON GENERAL HOSPITAL

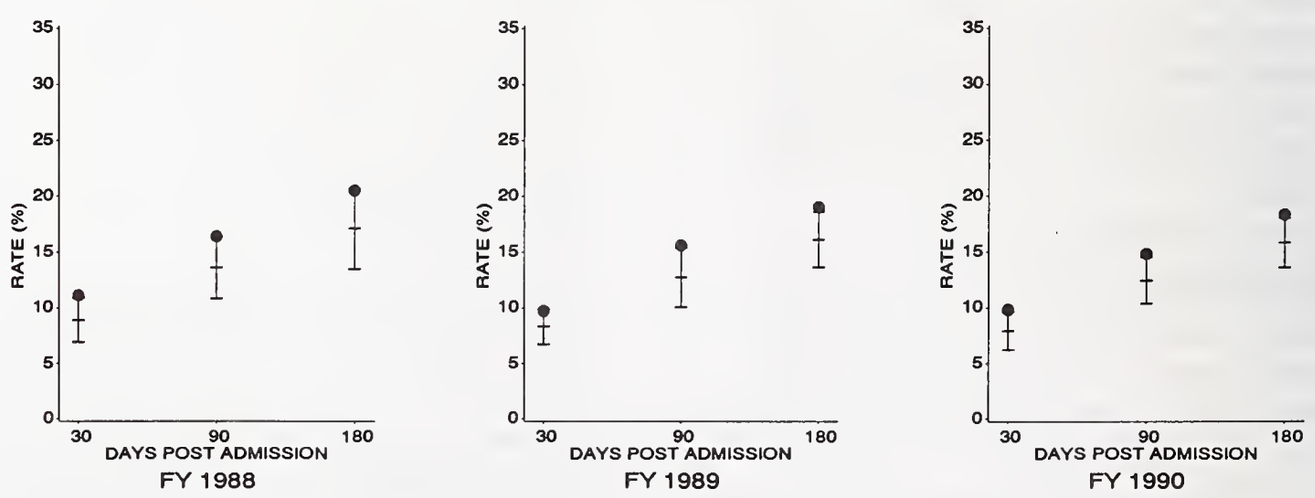
3120 VICTORIA BLVD
HAMPTON, VA 23669
Medicare Provider Number: 490093

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2155	9.8	7.9	0.9	14.8	12.4	1.0	18.3	15.8	1.1
CONDITIONS:										
Acute Myocardial Infarction	57	26.3	24.7	6.0	28.1	27.9	5.9	28.1	30.6	6.6
Congestive Heart Failure	141	14.2	13.4	3.0	20.6	21.1	4.9	27.7	26.9	5.0
Pneumonia/Influenza	77	15.6	12.8	6.7	22.1	17.6	8.8	26.0	21.2	7.5
Chronic Obstructive Pulmonary Disease	44	4.5	5.1	-----	6.8	9.8	-----	13.6	13.8	-----
Transient Cerebral Ischemia	22	4.5	1.0	-----	9.1	2.3	-----	9.1	4.0	-----
Stroke	89	22.5	19.0	4.9	30.3	25.8	6.3	38.2	29.9	7.5
Hip Fracture	54	3.7	6.8	5.0	7.4	11.6	6.9	13.0	14.8	6.6
Sepsis	23	26.1	25.5	-----	43.5	33.5	-----	52.2	39.0	-----
PROCEDURES:										
Angiopiasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	20	0.0	3.1	-----	0.0	5.6	-----	0.0	7.8	-----
Carotid Endarterectomy	2	0.0	0.5	-----	0.0	1.0	-----	0.0	1.5	-----
Hip Replacement/Reconstruction	29	0.0	4.6	-----	3.4	8.2	-----	6.9	10.7	-----
Open Reduction of Hip Fracture	30	3.3	5.7	-----	6.7	10.1	-----	10.0	13.2	-----
Prostatectomy	57	0.0	1.0	1.5	0.0	2.3	2.9	1.8	4.0	3.4
Cholecystectomy	21	0.0	1.2	-----	0.0	2.2	-----	4.8	3.0	-----
Hysterectomy	20	0.0	0.7	-----	0.0	1.5	-----	0.0	2.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases Is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SENTARA HAMPTON GENERAL HOSPITAL

Medicare Provider Number: 490093

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	60.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	51.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	51.1 %
Admitted for emergency	44.2 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	28.4 %
Chronic liver disease	1.0 %
Chronic renal disease	5.9 %
Chronic pulmonary disease	13.6 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	67.2%
State	29.9%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	251
Occupancy Rate	71.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	35.5 %
Case Mix Index (CMI)	1.2570

STAFFING:

Total Number of Physicians	170
Percent of Physicians Board Certified Specialists	78.2 %
Medical Residents/Interns	0
Registered Nurses	201
Licensed Practical Nurses	75

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SENTARA LEIGH HOSPITAL

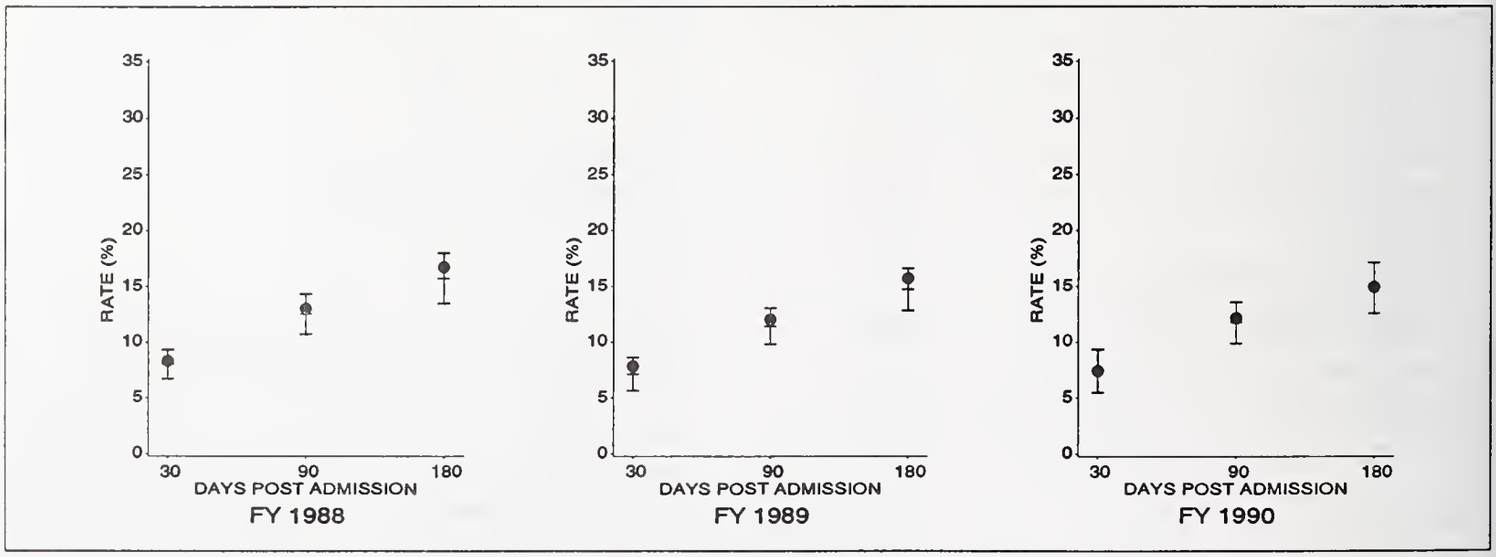
830 KEMPSVILLE RD
NORFOLK, VA 23507
Medicare Provider Number: 490046

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2725	7.4	7.4	1.0	12.1	11.7	0.9	14.9	14.8	1.1
CONDITIONS:										
Acute Myocardial Infarction	57	15.8	24.3	8.9	21.1	27.0	8.8	22.8	29.5	9.2
Congestive Heart Failure	99	13.1	14.6	5.8	17.2	22.6	8.6	24.2	28.8	8.7
Pneumonia/Influenza	93	15.1	14.0	3.7	21.5	19.5	4.3	22.6	22.9	4.4
Chronic Obstructive Pulmonary Disease	61	11.5	6.2	3.8	18.0	11.4	5.0	21.3	15.8	7.9
Transient Cerebral Ischemia	43	2.3	1.7	-----	9.3	3.6	-----	9.3	5.5	-----
Stroke	97	15.5	16.9	4.0	23.7	22.6	4.3	24.7	26.3	4.7
Hip Fracture	59	10.2	6.7	6.7	22.0	12.3	7.7	23.7	16.3	8.1
Sepsis	25	36.0	26.0	-----	40.0	34.3	-----	40.0	39.2	-----
PROCEDURES:										
Angioplasty	1	100.0	13.5	-----	100.0	14.8	-----	100.0	16.5	-----
Coronary Artery Bypass Graft	1	0.0	3.6	-----	0.0	4.3	-----	0.0	4.9	-----
Initial Pacemaker Insertion	15	0.0	2.7	-----	0.0	5.9	-----	0.0	9.0	-----
Carotid Endarterectomy	20	0.0	1.2	-----	5.0	2.2	-----	5.0	3.3	-----
Hip Replacement/Reconstruction	117	2.6	1.6	1.8	5.1	3.0	2.4	5.1	4.1	2.5
Open Reduction of Hip Fracture	25	8.0	6.7	-----	24.0	12.8	-----	28.0	17.4	-----
Prostatectomy	48	0.0	0.9	-----	0.0	2.2	-----	4.2	3.6	-----
Cholecystectomy	63	0.0	2.1	2.6	0.0	3.9	4.1	1.6	5.2	3.8
Hysterectomy	21	0.0	0.1	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SENTARA LEIGH HOSPITAL

Medicare Provider Number: 490046

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.7 years
Proportion female	59.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	69.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	29.7 %
Admitted for emergency	66.2 %

COMORBIDITIES:

Cancer	7.9 %
Chronic cardiovascular disease	24.6 %
Chronic liver disease	1.5 %
Chronic renal disease	4.3 %
Chronic pulmonary disease	12.9 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	33.2%
State	54.9%
Outside State	11.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	250
Occupancy Rate	76.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.7 %
Case Mix Index (CMI)	1.3460

STAFFING:

Total Number of Physicians	753
Percent of Physicians Board Certified Specialists	81.1 %
Medical Residents/Interns	13
Registered Nurses	258
Licensed Practical Nurses	51

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SENTARA NORFOLK GENERAL HOSPITAL

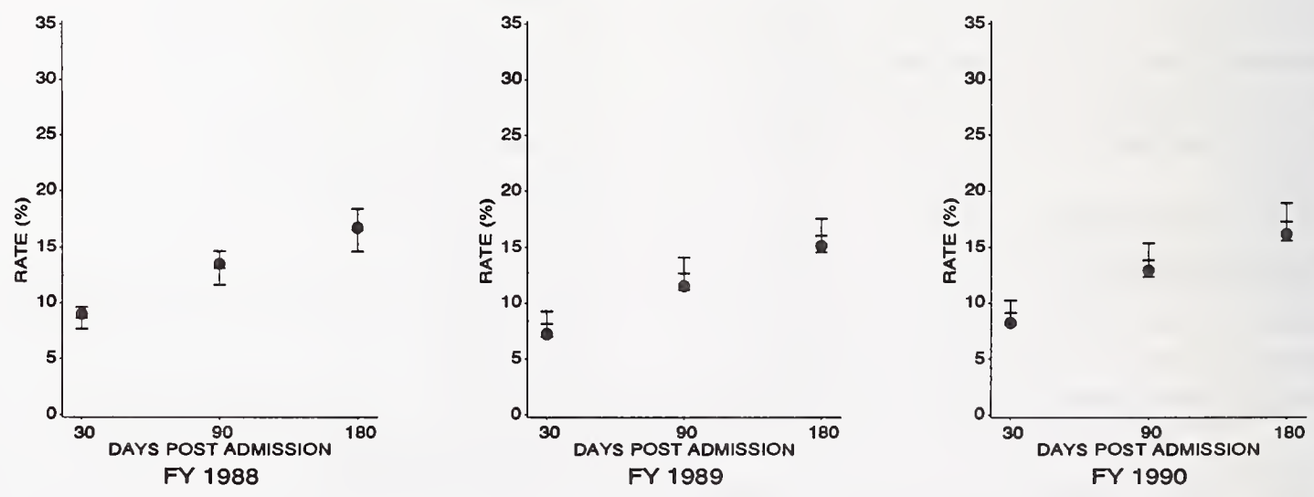
600 GRESHAM DR
NORFOLK, VA 23507
Medicare Provider Number: 490007

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4383	8.2	9.1	0.6	12.8	13.8	0.8	16.1	17.2	0.8
CONDITIONS:										
Acute Myocardial Infarction	166	16.3	25.2	4.0	16.9	28.0	4.4	18.7	30.6	4.7
Congestive Heart Failure	143	13.3	13.0	3.0	23.8	21.1	5.3	28.7	27.1	6.2
Pneumonia/Influenza	91	12.1	15.0	4.2	18.7	20.5	6.7	18.7	24.1	6.1
Chronic Obstructive Pulmonary Disease	42	11.9	7.7	-----	19.0	14.0	-----	19.0	18.8	-----
Transient Cerebral Ischemia	49	2.0	1.6	-----	2.0	3.5	-----	6.1	5.7	-----
Stroke	141	13.5	19.5	5.7	21.3	25.3	4.9	26.2	28.8	4.3
Hip Fracture	42	11.9	5.8	-----	14.3	10.6	-----	19.0	13.9	-----
Sepsis	42	23.8	27.0	-----	38.1	35.0	-----	45.2	39.8	-----
PROCEDURES:										
Angioplasty	156	1.9	3.7	2.8	3.2	4.7	3.5	3.8	5.7	3.8
Coronary Artery Bypass Graft	339	5.3	7.1	2.1	7.1	10.0	2.9	8.3	11.4	3.0
Initial Pacemaker Insertion	42	0.0	3.1	-----	2.4	6.0	-----	4.8	8.7	-----
Carotid Endarterectomy	36	0.0	1.6	-----	2.8	2.8	-----	2.8	4.0	-----
Hip Replacement/Reconstruction	45	4.4	3.2	-----	6.7	6.1	-----	8.9	8.1	-----
Open Reduction of Hip Fracture	18	11.1	5.3	-----	11.1	10.0	-----	16.7	13.8	-----
Prostatectomy	72	0.0	1.5	1.9	2.8	3.4	2.2	5.6	5.4	2.7
Cholecystectomy	45	2.2	3.5	-----	4.4	5.4	-----	6.7	6.6	-----
Hysterectomy	15	0.0	1.3	-----	0.0	2.8	-----	6.7	4.1	-----

* The Standard Deviation (SD) Is not calculated If the number of deaths or cases Is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SENTARA NORFOLK GENERAL HOSPITAL

Medicare Provider Number: 490007

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.1 years
Proportion female	50.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	52.7 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	5.9 %
Admitted for emergency	54.7 %

COMORBIDITIES:

Cancer	8.4 %
Chronic cardiovascular disease	37.0 %
Chronic liver disease	0.9 %
Chronic renal disease	5.3 %
Chronic pulmonary disease	13.2 %
Cerebrovascular degeneration	3.3 %
Diabetes mellitus	10.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	46.5%
State	41.0%
Outside State	12.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	610
Occupancy Rate	81.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	28.9 %
Case Mix Index (CMI)	1.8021

STAFFING:

Total Number of Physicians	753
Percent of Physicians Board Certified Specialists	81.1 %
Medical Residents/Interns	0
Registered Nurses	935
Licensed Practical Nurses	173

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SHENANDOAH COUNTY MEMORIAL HOSPITAL

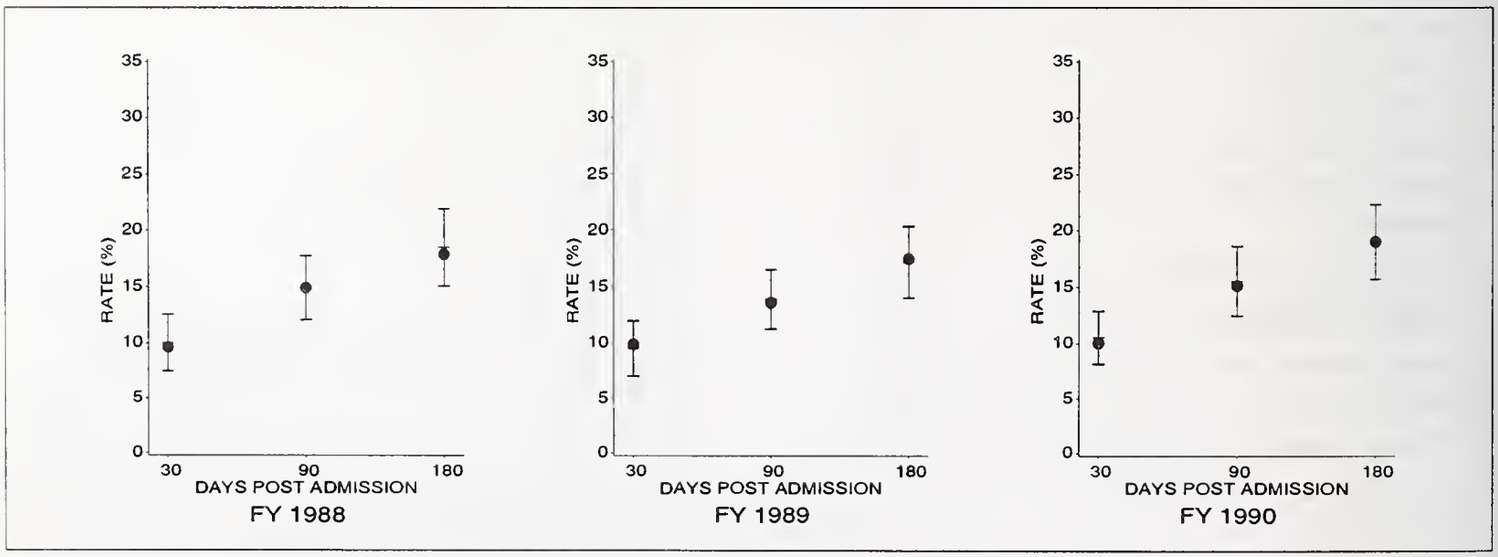
P O BOX 508
WOODSTOCK, VA 22664
Medicare Provider Number: 490006

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	741	10.0	10.5	1.2	15.1	15.5	1.6	19.0	19.0	1.7
CONDITIONS:										
Acute Myocardial Infarction	17	11.8	29.6	-----	11.8	33.0	-----	17.6	36.2	-----
Congestive Heart Failure	43	14.0	15.3	-----	18.6	24.4	-----	30.2	31.0	-----
Pneumonia/Influenza	68	10.3	16.6	9.0	14.7	22.5	10.3	20.6	26.5	10.1
Chronic Obstructive Pulmonary Disease	12	0.0	4.7	-----	8.3	8.9	-----	8.3	12.5	-----
Transient Cerebral Ischemia	9	0.0	2.4	-----	22.2	5.7	-----	22.2	9.4	-----
Stroke	35	25.7	20.9	-----	34.3	28.7	-----	42.9	33.1	-----
Hip Fracture	24	8.3	6.3	-----	12.5	11.7	-----	12.5	15.6	-----
Sepsis	10	40.0	19.2	-----	40.0	24.1	-----	40.0	27.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	10	0.0	3.2	-----	0.0	6.2	-----	0.0	8.6	-----
Open Reduction of Hip Fracture	16	12.5	6.1	-----	18.8	11.6	-----	18.8	15.6	-----
Prostatectomy	18	0.0	1.1	-----	0.0	2.8	-----	0.0	5.1	-----
Cholecystectomy	18	11.1	4.5	-----	11.1	8.2	-----	11.1	10.6	-----
Hysterectomy	4	0.0	2.4	-----	0.0	5.4	-----	0.0	8.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SHENANDOAH COUNTY MEMORIAL HOSPITAL

Medicare Provider Number: 490006

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.7 years
Proportion female	57.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	14.3 %
Admitted for emergency	60.7 %

COMORBIDITIES:

Cancer	6.5 %
Chronic cardiovascular disease	26.9 %
Chronic liver disease	0.8 %
Chronic renal disease	3.0 %
Chronic pulmonary disease	14.6 %
Cerebrovascular degeneration	5.8 %
Diabetes mellitus	6.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.2%
State	13.0%
Outside State	3.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	129
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	43.6 %
Case Mix Index (CMI)	1.1839

STAFFING:

Total Number of Physicians	25
Percent of Physicians Board Certified Specialists	96.0 %
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SMYTH COUNTY COMMUNITY HOSPITAL

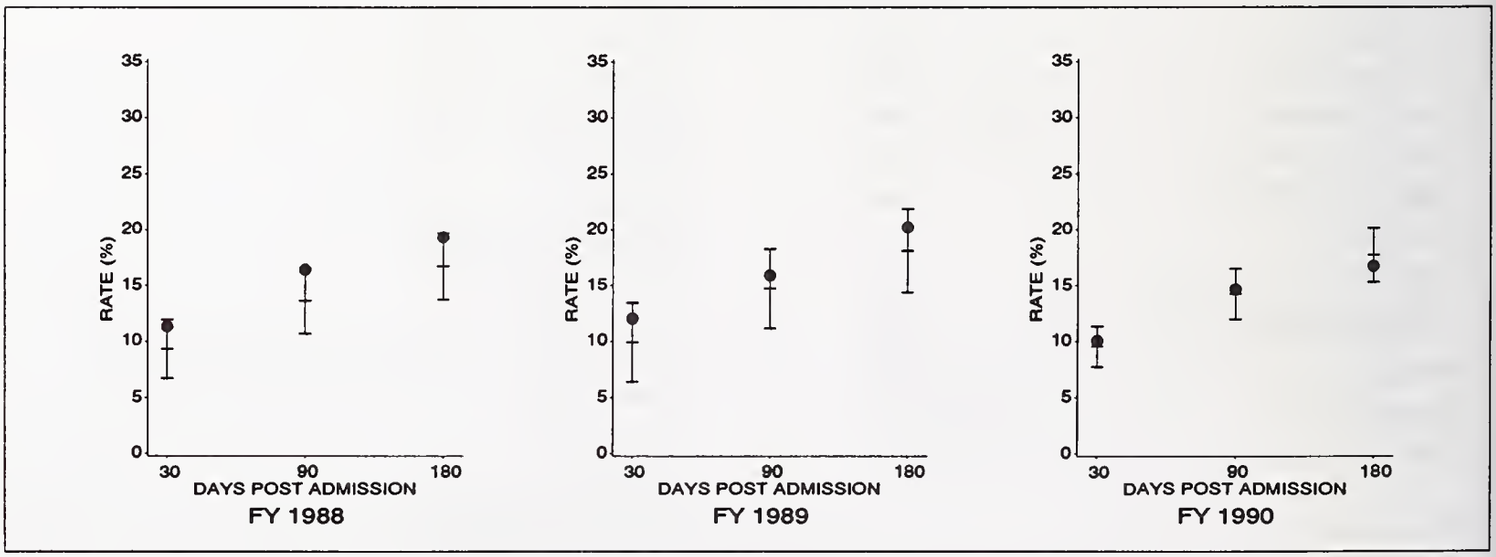
700 PARK BLVD
MARION, VA 24354
Medicare Provider Number: 490038

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1089	10.0	9.5	0.9	14.6	14.2	1.1	16.7	17.7	1.2
CONDITIONS:										
Acute Myocardial Infarction	59	27.1	23.3	6.5	32.2	26.1	6.7	32.2	28.8	6.3
Congestive Heart Failure	57	15.8	11.7	6.3	22.8	18.8	6.2	24.6	24.6	5.8
Pneumonia/Influenza	92	14.1	13.3	3.8	19.6	18.4	4.1	20.7	21.9	4.4
Chronic Obstructive Pulmonary Disease	13	15.4	5.4	-----	15.4	10.2	-----	23.1	14.0	-----
Transient Cerebral Ischemia	12	0.0	1.5	-----	0.0	3.2	-----	8.3	4.7	-----
Stroke	32	18.8	23.1	-----	37.5	30.8	-----	37.5	35.2	-----
Hip Fracture	32	6.3	6.1	-----	12.5	10.4	-----	18.8	13.4	-----
Sepsis	10	20.0	21.3	-----	30.0	27.1	-----	30.0	31.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	20.0	7.5	-----	20.0	15.0	-----	20.0	20.7	-----
Carotid Endarterectomy	4	0.0	1.0	-----	0.0	2.1	-----	0.0	3.4	-----
Hip Replacement/Reconstruction	12	8.3	6.6	-----	25.0	10.8	-----	41.7	13.9	-----
Open Reduction of Hip Fracture	20	5.0	6.4	-----	10.0	11.3	-----	10.0	14.5	-----
Prostatectomy	39	0.0	1.4	-----	7.7	3.2	-----	12.8	5.2	-----
Cholecystectomy	15	0.0	1.2	-----	0.0	2.0	-----	6.7	2.6	-----
Hysterectomy	5	0.0	0.1	-----	0.0	0.2	-----	0.0	0.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SMYTH COUNTY COMMUNITY HOSPITAL

Medicare Provider Number: 490038

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.8 years
Proportion female	57.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	41.4 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	6.4 %
Admitted for emergency	12.6 %

COMORBIDITIES:

Cancer	5.5 %
Chronic cardiovascular disease	37.0 %
Chronic liver disease	0.6 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	28.5 %
Cerebrovascular degeneration	4.1 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	76.7%
State	21.4%
Outside State	1.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	285
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	49.7 %
Case Mix Index (CMI)	1.2677

STAFFING:

Total Number of Physicians	35
Percent of Physicians Board Certified Specialists	82.9 %
Medical Residents/Interns	0
Registered Nurses	74
Licensed Practical Nurses	72

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SOUTHAMPTON MEMORIAL HOSPITAL

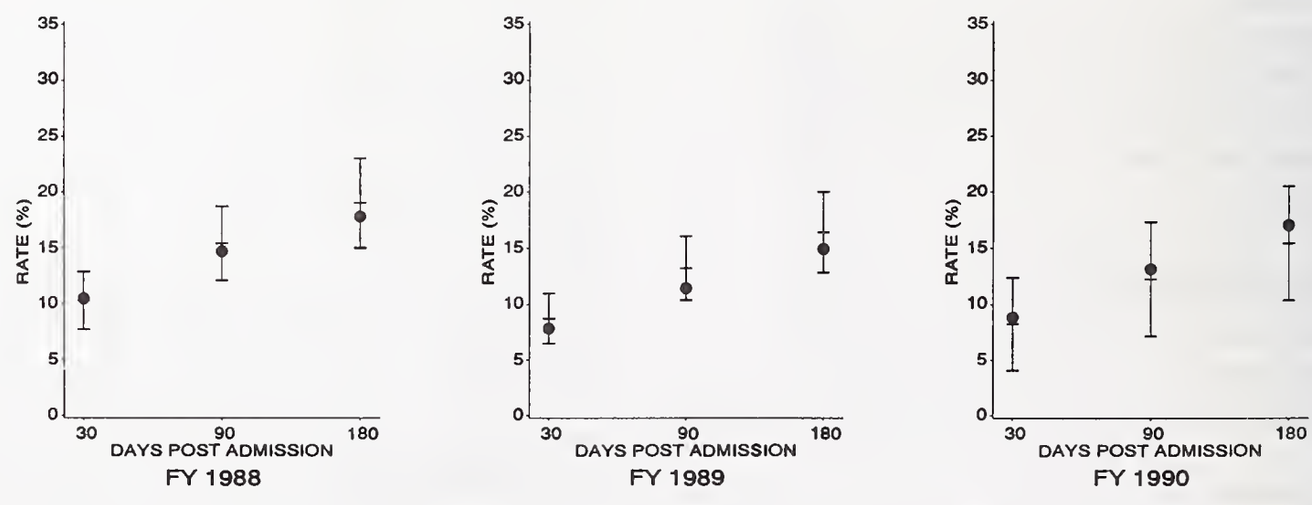
100 FAIRVIEW DR
FRANKLIN, VA 23851
Medicare Provider Number: 490092

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	735	8.8	8.2	2.1	13.1	12.2	2.5	17.0	15.4	2.6
CONDITIONS:										
Acute Myocardial Infarction	17	58.8	32.9	-----	58.8	35.9	-----	64.7	38.8	-----
Congestive Heart Failure	52	13.5	14.2	6.1	17.3	21.0	7.2	23.1	26.7	7.4
Pneumonia/Influenza	37	16.2	14.6	-----	18.9	20.0	-----	24.3	23.6	-----
Chronic Obstructive Pulmonary Disease	24	0.0	5.5	-----	4.2	10.0	-----	12.5	13.9	-----
Transient Cerebral Ischemia	8	12.5	2.1	-----	12.5	4.7	-----	12.5	7.6	-----
Stroke	38	23.7	19.8	-----	34.2	24.6	-----	36.8	28.0	-----
Hip Fracture	22	13.6	6.9	-----	18.2	12.1	-----	18.2	15.3	-----
Sepsis	6	16.7	28.0	-----	50.0	35.4	-----	66.7	41.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	6	0.0	2.6	-----	0.0	5.8	-----	0.0	9.3	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	10	20.0	4.3	-----	20.0	7.6	-----	20.0	9.4	-----
Open Reduction of Hip Fracture	13	7.7	5.4	-----	15.4	10.0	-----	15.4	13.2	-----
Prostatectomy	11	0.0	0.7	-----	0.0	1.8	-----	9.1	3.2	-----
Cholecystectomy	17	5.9	2.6	-----	11.8	5.3	-----	11.8	7.3	-----
Hysterectomy	3	0.0	0.1	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTHAMPTON MEMORIAL HOSPITAL

Medicare Provider Number: 490092

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.6 years
Proportion female	60.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.0 %
Transferred from skilled nursing facility	0.3 %
Admitted for elective procedure	13.3 %
Admitted for emergency	26.9 %

COMORBIDITIES:

Cancer	4.4 %
Chronic cardiovascular disease	37.0 %
Chronic liver disease	1.5 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	12.1 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	39.0%
State	55.2%
Outside State	5.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	214
Occupancy Rate	79.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.0 %
Case Mix Index (CMI)	1.1271

STAFFING:

Total Number of Physicians	33
Percent of Physicians Board Certified Specialists	81.8 %
Medical Residents/Interns	0
Registered Nurses	46
Licensed Practical Nurses	36

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SOUTHSIDE COMMUNITY HOSPITAL

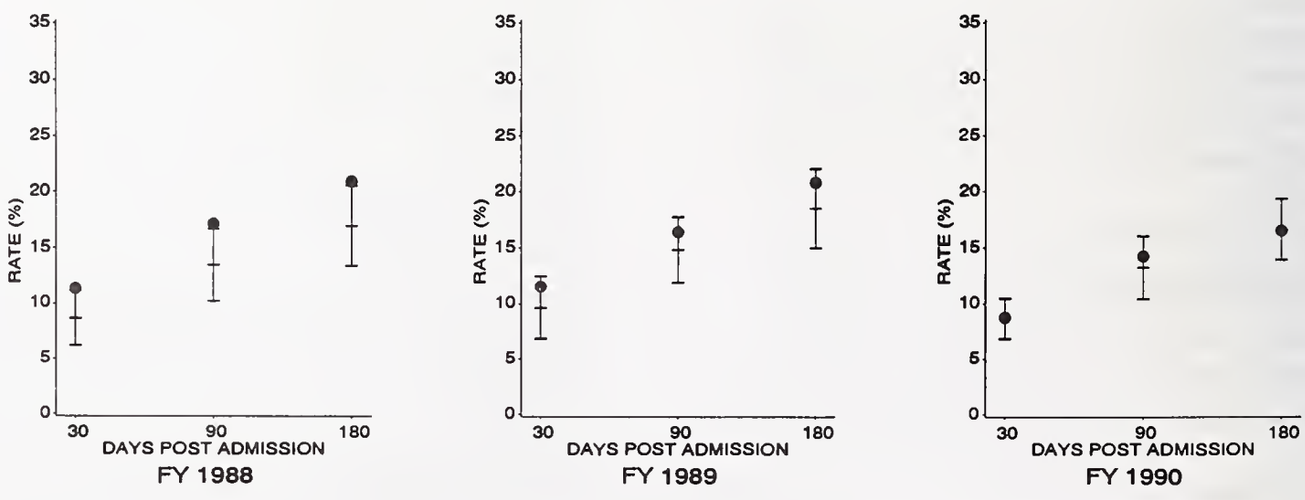
800 OAK ST
FARMVILLE, VA 23901
Medicare Provider Number: 490090

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	976	8.7	8.6	0.9	14.2	13.2	1.4	16.5	16.6	1.4
CONDITIONS:										
Acute Myocardial Infarction	17	17.6	26.0	-----	17.6	28.7	-----	17.6	31.4	-----
Congestive Heart Failure	52	25.0	13.8	8.7	30.8	21.5	8.2	32.7	27.1	7.2
Pneumonia/Influenza	77	11.7	12.5	3.8	16.9	17.2	4.4	18.2	20.6	5.1
Chronic Obstructive Pulmonary Disease	12	8.3	8.7	-----	8.3	14.6	-----	25.0	19.2	-----
Transient Cerebral Ischemia	20	0.0	3.4	-----	0.0	7.6	-----	0.0	11.9	-----
Stroke	42	19.0	19.4	-----	31.0	26.7	-----	31.0	30.8	-----
Hip Fracture	30	3.3	6.2	-----	13.3	10.5	-----	16.7	13.8	-----
Sepsis	3	33.3	27.0	-----	33.3	33.9	-----	33.3	39.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	11	0.0	4.3	-----	9.1	8.1	-----	18.2	11.3	-----
Open Reduction of Hip Fracture	20	5.0	4.1	-----	15.0	7.4	-----	15.0	10.0	-----
Prostatectomy	75	1.3	1.1	2.6	5.3	2.6	2.9	8.0	4.5	3.8
Cholecystectomy	31	0.0	2.5	-----	3.2	4.7	-----	3.2	6.3	-----
Hysterectomy	7	0.0	0.5	-----	0.0	1.1	-----	0.0	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTHSIDE COMMUNITY HOSPITAL
Medicare Provider Number: 490090

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.4 years
Proportion female	53.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.3 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	1.9 %
Admitted for emergency	30.2 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	28.6 %
Chronic liver disease	0.6 %
Chronic renal disease	3.9 %
Chronic pulmonary disease	14.8 %
Cerebrovascular degeneration	3.7 %
Diabetes mellitus	9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	37.7%
State	60.4%
Outside State	1.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.2 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	118
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	37.4 %
Case Mix Index (CMI)	1.1425

STAFFING:

Total Number of Physicians	29
Percent of Physicians Board Certified Specialists	72.4 %
Medical Residents/Interns	0
Registered Nurses	62
Licensed Practical Nurses	55

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SOUTHSIDE REGIONAL MEDICAL CENTER

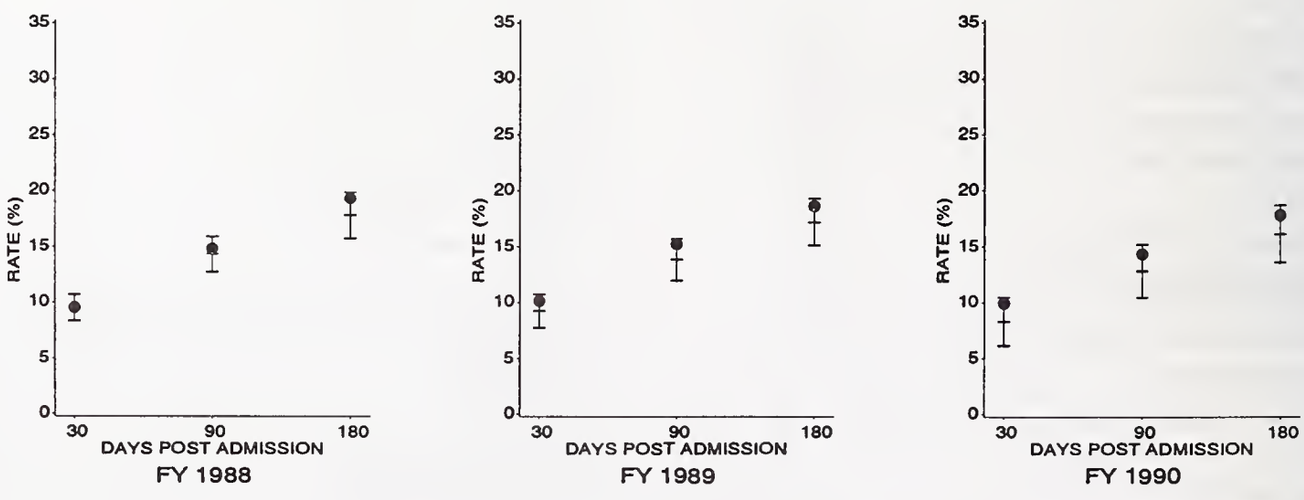
801 S ADAMS STREET
PETERSBURG, VA 23803
Medicare Provider Number: 490067

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2176	9.9	8.3	1.1	14.3	12.8	1.2	17.8	16.1	1.3
CONDITIONS:										
Acute Myocardial Infarction	59	20.3	23.8	7.0	23.7	26.5	7.0	28.8	28.9	7.0
Congestive Heart Failure	146	13.0	14.3	3.0	22.6	22.2	3.9	28.1	28.2	4.3
Pneumonia/Influenza	78	21.8	14.5	7.8	25.6	19.8	8.9	29.5	23.4	9.3
Chronic Obstructive Pulmonary Disease	7	0.0	3.7	-----	14.3	7.0	-----	14.3	9.8	-----
Transient Cerebral Ischemia	52	0.0	1.3	2.2	1.9	3.0	3.5	3.8	5.0	5.3
Stroke	105	15.2	17.0	4.6	19.0	23.6	5.2	21.0	27.5	6.1
Hip Fracture	49	10.2	4.6	-----	12.2	8.3	-----	16.3	11.0	-----
Sepsis	45	37.8	23.0	-----	44.4	30.9	-----	48.9	35.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	23	4.3	5.4	-----	8.7	9.9	-----	8.7	13.5	-----
Carotid Endarterectomy	2	0.0	1.2	-----	0.0	2.2	-----	0.0	3.0	-----
Hip Replacement/Reconstruction	28	3.6	3.4	-----	3.6	6.5	-----	10.7	8.9	-----
Open Reduction of Hip Fracture	19	10.5	3.6	-----	15.8	6.8	-----	15.8	9.3	-----
Prostatectomy	127	3.1	0.9	2.0	4.7	2.1	2.6	5.5	3.6	3.4
Cholecystectomy	43	4.7	3.0	-----	7.0	5.4	-----	11.6	7.1	-----
Hysterectomy	25	0.0	0.3	-----	0.0	0.7	-----	0.0	1.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTHSIDE REGIONAL MEDICAL CENTER

Medicare Provider Number: 490067

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.2 years
Proportion female	57.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	29.3 %
Admitted for emergency	68.8 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	27.8 %
Chronic liver disease	0.6 %
Chronic renal disease	4.3 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	12.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	52.3%
State	45.9%
Outside State	1.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	275
Occupancy Rate	80.0 %
Ownership/Control	District/Authority
Medicare Discharges	30.7 %
Case Mix Index (CMI)	1.2119

STAFFING:

Total Number of Physicians	141
Percent of Physicians Board Certified Specialists	81.6 %
Medical Residents/Interns	0
Registered Nurses	220
Licensed Practical Nurses	164

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SOUTHWESTERN STATE HOSPITAL

BOX 670
MARION, VA 24354
Medicare Provider Number: 490105

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	33	3.0	4.4	-----	3.0	7.5	-----	3.0	10.1	-----
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	4	0.0	21.1	-----	0.0	30.1	-----	0.0	34.4	-----
Chronic Obstructive Pulmonary Disease	1	0.0	4.0	-----	0.0	9.2	-----	0.0	15.1	-----
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

SOUTHWESTERN STATE HOSPITAL
Medicare Provider Number: 490105

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	55.0 years
Proportion female	21.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	0.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	9.1 %

COMORBIDITIES:

Cancer	6.1 %
Chronic cardiovascular disease	9.1 %
Chronic liver disease	24.2 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	30.3 %
Cerebrovascular degeneration	33.3 %
Diabetes mellitus	3.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	31.4%
State	65.7%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1991

PROFILE:

Total Beds	18
Ownership/Control	State Government
Case Mix Index (CMI)	0.7994

STAFFING:

Medical Residents/Interns	1
Registered Nurses	7
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	Yes
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ST MARYS HOSPITAL

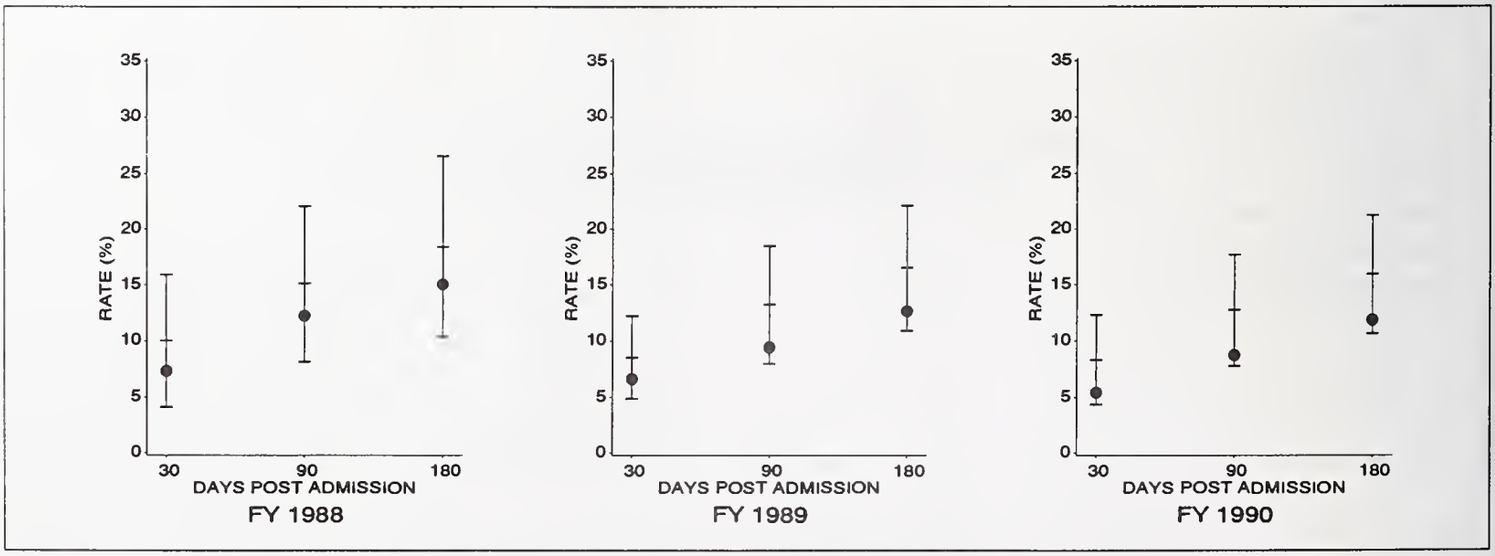
THIRD STREET NE
NORTON, VA 24273
Medicare Provider Number: 490027

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	390	5.4	8.3	2.0	8.7	12.7	2.5	11.8	15.9	2.6
CONDITIONS:										
Acute Myocardial Infarction	4	0.0	25.9	-----	0.0	28.7	-----	0.0	31.7	-----
Congestive Heart Failure	18	22.2	12.8	-----	22.2	20.7	-----	22.2	26.6	-----
Pneumonia/Influenza	20	5.0	13.5	-----	10.0	18.7	-----	20.0	22.3	-----
Chronic Obstructive Pulmonary Disease	20	0.0	5.3	-----	5.0	10.2	-----	10.0	14.2	-----
Transient Cerebral Ischemia	6	0.0	1.2	-----	16.7	2.9	-----	16.7	5.0	-----
Stroke	11	18.2	18.9	-----	18.2	25.2	-----	18.2	28.9	-----
Hip Fracture	2	0.0	4.2	-----	0.0	7.3	-----	0.0	10.5	-----
Sepsis	4	25.0	31.4	-----	25.0	38.4	-----	25.0	42.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	0.8	-----	0.0	1.8	-----	0.0	3.3	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	3.2	-----	0.0	6.0	-----	0.0	8.7	-----
Open Reduction of Hip Fracture	1	0.0	4.5	-----	0.0	8.1	-----	0.0	11.6	-----
Prostatectomy	12	0.0	0.7	-----	0.0	1.6	-----	8.3	2.9	-----
Cholecystectomy	5	0.0	1.4	-----	20.0	2.7	-----	20.0	3.7	-----
Hysterectomy	6	0.0	0.2	-----	0.0	0.5	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HOSPITAL
Medicare Provider Number: 490027

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	70.6 years
Proportion female	56.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	59.5 %

COMORBIDITIES:

Cancer	3.3 %
Chronic cardiovascular disease	32.3 %
Chronic liver disease	0.8 %
Chronic renal disease	1.0 %
Chronic pulmonary disease	32.6 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	15.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	16.9%
State	77.7%
Outside State	5.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	133
Occupancy Rate	50.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	32.1 %
Case Mix Index (CMI)	1.0906

STAFFING:

Total Number of Physicians	68
Percent of Physicians Board Certified Specialists	54.4 %
Medical Residents/Interns	0
Registered Nurses	42
Licensed Practical Nurses	42

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ST MARYS HOSPITAL OF RICHMOND

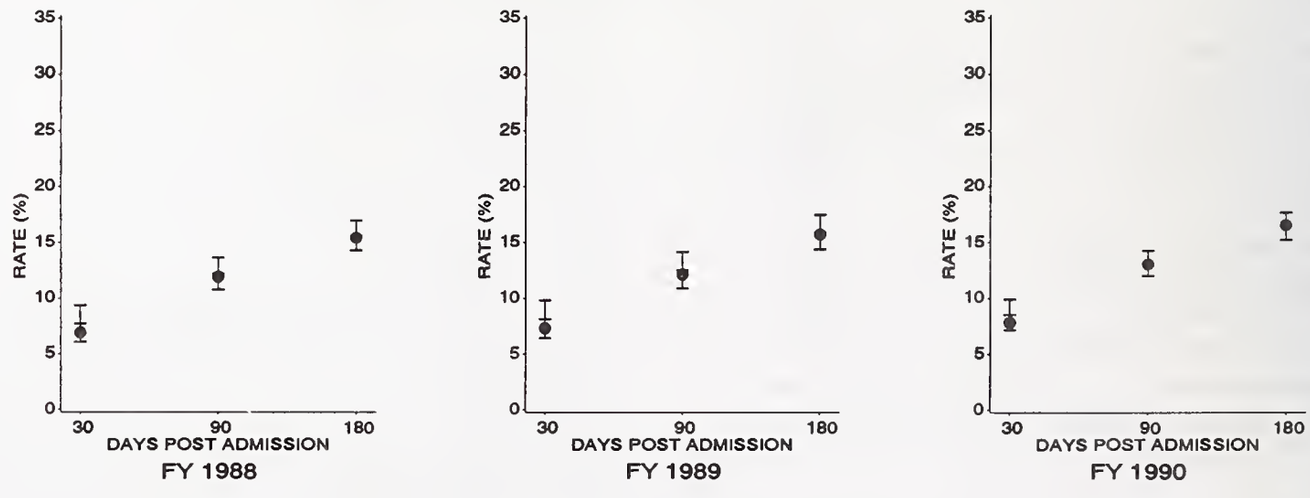
5801 BREMO RD
RICHMOND, VA 23226
Medicare Provider Number: 490059

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3573	7.8	8.5	0.7	13.0	13.1	0.6	16.5	16.4	0.6
CONDITIONS:										
Acute Myocardial Infarction	88	25.0	26.4	4.8	29.5	29.5	4.9	34.1	32.2	5.3
Congestive Heart Failure	134	11.2	15.4	4.7	21.6	24.6	5.2	26.9	30.9	5.6
Pneumonia/Influenza	98	17.3	16.7	5.9	29.6	23.5	8.4	33.7	27.7	8.1
Chronic Obstructive Pulmonary Disease	39	10.3	6.2	-----	15.4	11.4	-----	20.5	15.3	-----
Transient Cerebral Ischemia	82	1.2	1.3	1.3	1.2	3.0	2.4	3.7	4.8	2.8
Stroke	134	17.2	19.6	4.8	19.4	25.3	5.8	22.4	28.8	6.1
Hip Fracture	99	7.1	5.7	4.0	12.1	10.1	4.7	18.2	13.1	5.6
Sepsis	39	20.5	33.3	-----	33.3	41.9	-----	35.9	47.1	-----
PROCEDURES:										
Angioplasty	32	0.0	4.1	-----	0.0	4.9	-----	0.0	5.7	-----
Coronary Artery Bypass Graft	57	5.3	6.1	5.1	5.3	8.5	6.3	5.3	9.6	6.6
Initial Pacemaker Insertion	33	6.1	3.2	-----	6.1	5.9	-----	9.1	8.5	-----
Carotid Endarterectomy	39	0.0	1.4	-----	0.0	2.5	-----	0.0	3.7	-----
Hip Replacement/Reconstruction	81	3.7	2.5	3.2	7.4	4.7	4.4	8.6	6.4	4.5
Open Reduction of Hip Fracture	32	9.4	5.9	-----	12.5	10.8	-----	21.9	14.4	-----
Prostatectomy	116	0.9	0.9	1.3	3.4	2.0	2.3	6.9	3.4	3.8
Cholecystectomy	50	0.0	2.1	-----	0.0	3.5	-----	2.0	4.4	-----
Hysterectomy	29	0.0	0.4	-----	0.0	0.9	-----	0.0	1.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HOSPITAL OF RICHMOND

Medicare Provider Number: 490059

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	56.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	49.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	29.0 %
Admitted for emergency	50.3 %

COMORBIDITIES:

Cancer	9.4 %
Chronic cardiovascular disease	27.1 %
Chronic liver disease	1.0 %
Chronic renal disease	3.2 %
Chronic pulmonary disease	11.5 %
Cerebrovascular degeneration	4.8 %
Diabetes mellitus	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	39.0%
State	58.7%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	369
Occupancy Rate	75.0 %
Ownership/Control	Church
Medicare Discharges	32.6 %
Case Mix Index (CMI)	1.3803

STAFFING:

Total Number of Physicians	418
Percent of Physicians Board Certified Specialists	90.4 %
Medical Residents/Interns	0
Registered Nurses	362
Licensed Practical Nurses	71

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

STONEWALL JACKSON HOSPITAL

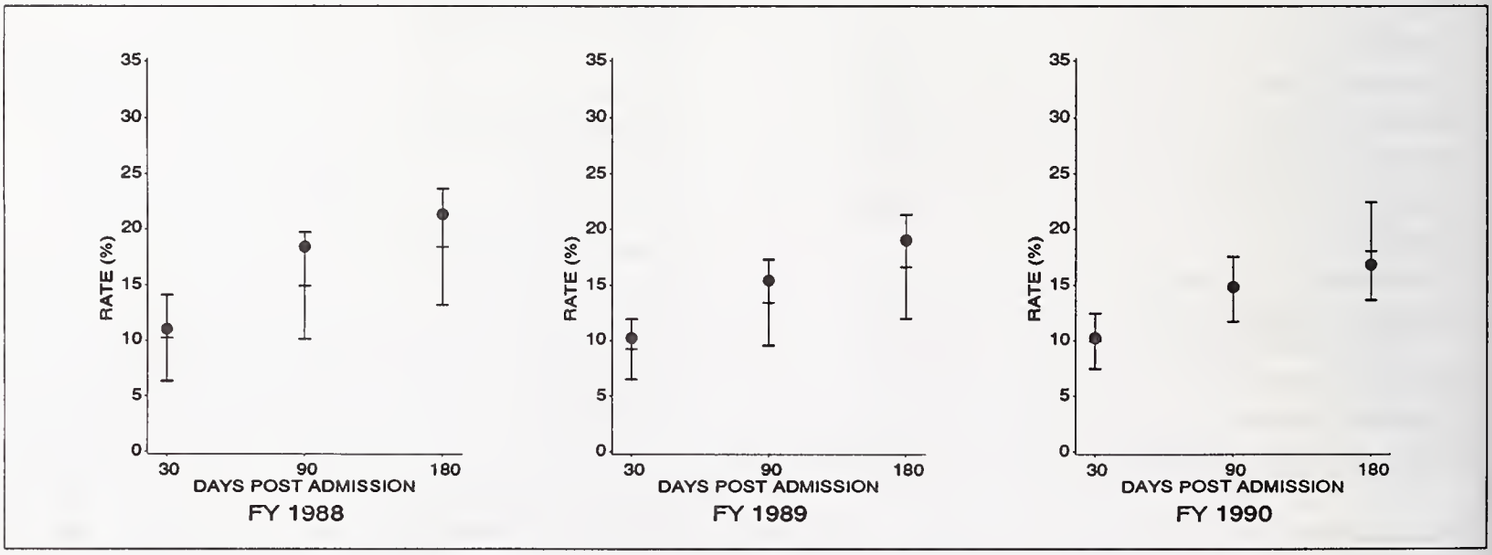
SPOTSWOOD ROAD
LEXINGTON, VA 24450
Medicare Provider Number: 490031

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	596	10.2	9.9	1.3	14.8	14.6	1.5	16.8	18.0	2.2
CONDITIONS:										
Acute Myocardial Infarction	29	10.3	23.8	-----	10.3	26.3	-----	13.8	28.8	-----
Congestive Heart Failure	32	9.4	15.1	-----	25.0	23.9	-----	28.1	30.6	-----
Pneumonia/Influenza	47	8.5	15.8	-----	14.9	21.5	-----	17.0	25.3	-----
Chronic Obstructive Pulmonary Disease	7	0.0	6.8	-----	0.0	12.5	-----	0.0	17.2	-----
Transient Cerebral Ischemia	4	0.0	0.9	-----	0.0	2.2	-----	0.0	3.9	-----
Stroke	14	14.3	17.7	-----	14.3	24.8	-----	14.3	28.6	-----
Hip Fracture	20	5.0	5.8	-----	5.0	10.2	-----	10.0	13.3	-----
Sepsis	6	16.7	20.5	-----	16.7	26.8	-----	16.7	31.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	13	7.7	3.4	-----	7.7	6.4	-----	7.7	8.5	-----
Open Reduction of Hip Fracture	5	0.0	7.0	-----	0.0	12.4	-----	0.0	16.5	-----
Prostatectomy	0									
Cholecystectomy	19	0.0	2.5	-----	0.0	4.6	-----	0.0	5.8	-----
Hysterectomy	4	0.0	0.2	-----	0.0	0.4	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



STONEWALL JACKSON HOSPITAL

Medicare Provider Number: 490031

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	56.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	12.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	65.0 %

COMORBIDITIES:

Cancer	6.4 %
Chronic cardiovascular disease	31.8 %
Chronic liver disease	1.3 %
Chronic renal disease	1.2 %
Chronic pulmonary disease	11.7 %
Cerebrovascular degeneration	6.9 %
Diabetes mellitus	6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	34.1%
State	64.4%
Outside State	1.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	130
Occupancy Rate	58.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.1 %
Case Mix Index (CMI)	1.0361

STAFFING:

Total Number of Physicians	21
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	38
Licensed Practical Nurses	31

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

STUART CIRCLE HOSPITAL

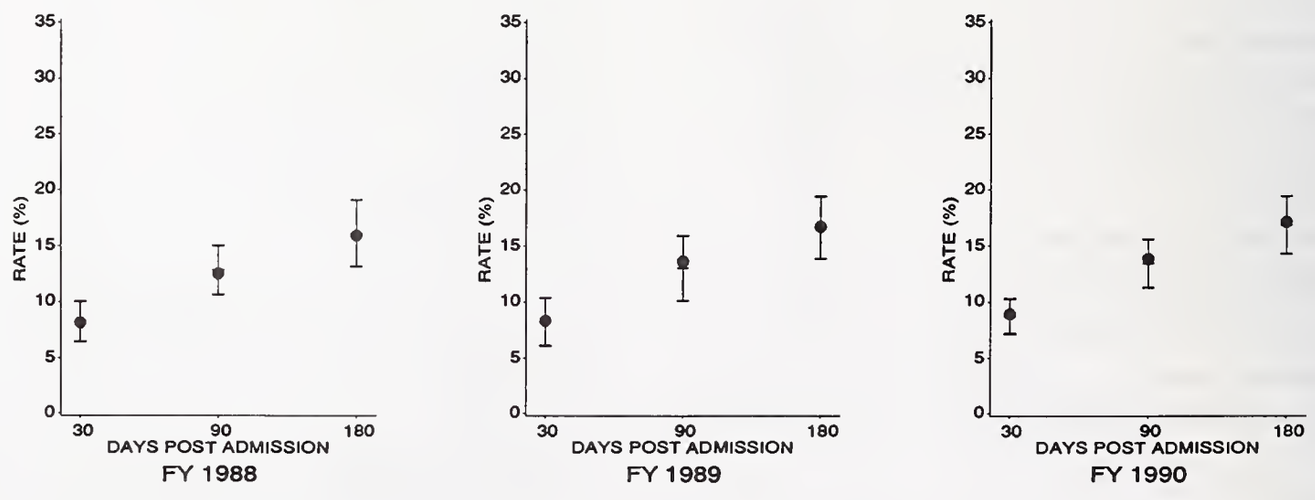
413-21 STUART CIRCLE
RICHMOND, VA 23220
Medicare Provider Number: 490091

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1738	8.9	8.7	0.8	13.8	13.4	1.1	17.1	16.8	1.3
CONDITIONS:										
Acute Myocardial Infarction	35	25.7	28.6	-----	28.6	32.2	-----	34.3	35.3	-----
Congestive Heart Failure	56	21.4	16.4	7.9	32.1	25.1	7.8	35.7	31.4	6.9
Pneumonia/Influenza	86	16.3	15.6	3.9	24.4	21.5	5.8	34.9	25.3	6.8
Chronic Obstructive Pulmonary Disease	31	12.9	5.7	-----	22.6	10.9	-----	32.3	15.3	-----
Transient Cerebral Ischemia	29	0.0	1.8	-----	0.0	4.1	-----	3.4	6.7	-----
Stroke	66	13.6	20.1	8.4	19.7	26.8	10.6	24.2	30.9	10.6
Hip Fracture	24	8.3	7.3	-----	12.5	13.1	-----	12.5	17.0	-----
Sepsis	15	26.7	28.6	-----	26.7	37.2	-----	40.0	43.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	10	10.0	1.9	-----	10.0	3.8	-----	10.0	5.8	-----
Carotid Endarterectomy	5	0.0	1.4	-----	0.0	2.8	-----	0.0	3.9	-----
Hip Replacement/Reconstruction	22	9.1	4.2	-----	9.1	8.6	-----	9.1	12.0	-----
Open Reduction of Hip Fracture	9	11.1	6.4	-----	22.2	11.9	-----	22.2	15.9	-----
Prostatectomy	31	3.2	1.4	-----	3.2	3.5	-----	3.2	6.0	-----
Cholecystectomy	16	0.0	2.0	-----	0.0	3.6	-----	6.3	4.7	-----
Hysterectomy	29	0.0	0.5	-----	0.0	1.0	-----	0.0	1.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



STUART CIRCLE HOSPITAL
Medicare Provider Number: 490091

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.8 years
Proportion female	66.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	56.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.5 %
Admitted for emergency	69.9 %

COMORBIDITIES:

Cancer	8.6 %
Chronic cardiovascular disease	27.2 %
Chronic liver disease	0.6 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	14.6 %
Cerebrovascular degeneration	6.3 %
Diabetes mellitus	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	46.6%
State	51.8%
Outside State	1.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.4 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1991

PROFILE:

Total Beds	153
Ownership/Control	Private, For Profit
Case Mix Index (CMI)	1.2232

STAFFING:

Medical Residents/Interns	0
Registered Nurses	114
Licensed Practical Nurses	19

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

TAZEWELL COMMUNITY HOSPITAL

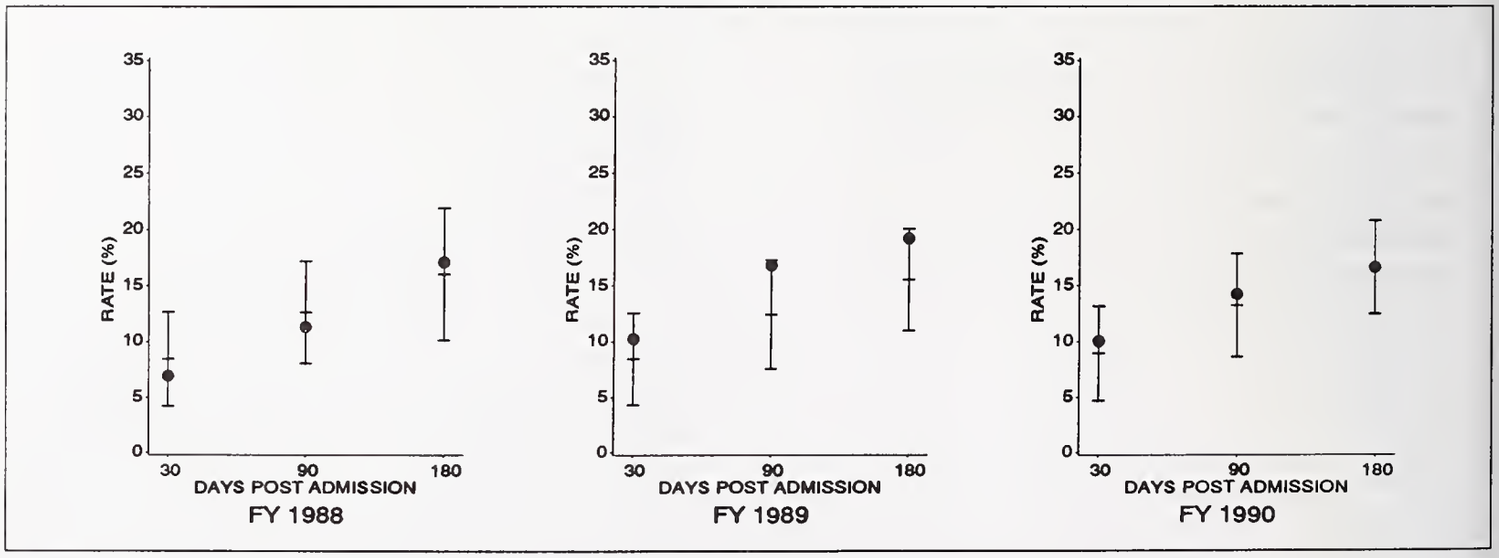
PO BOX 607
TAZEWELL, VA 24651
Medicare Provider Number: 490117

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	452	10.0	8.9	2.1	14.2	13.2	2.3	16.6	16.6	2.1
CONDITIONS:										
Acute Myocardial Infarction	12	33.3	23.1	-----	33.3	25.2	-----	33.3	27.7	-----
Congestive Heart Failure	34	11.8	13.6	-----	14.7	21.2	-----	17.6	27.3	-----
Pneumonia/Influenza	23	8.7	8.4	-----	13.0	11.6	-----	13.0	14.4	-----
Chronic Obstructive Pulmonary Disease	24	0.0	4.5	-----	4.2	8.4	-----	4.2	11.9	-----
Transient Cerebral Ischemia	15	0.0	1.3	-----	0.0	3.1	-----	0.0	5.0	-----
Stroke	22	40.9	24.2	-----	45.5	31.2	-----	45.5	35.3	-----
Hip Fracture	1	0.0	5.1	-----	0.0	11.1	-----	0.0	18.1	-----
Sepsis	5	40.0	33.1	-----	60.0	41.4	-----	60.0	45.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	5	0.0	0.6	-----	0.0	1.4	-----	0.0	2.6	-----
Cholecystectomy	9	11.1	3.8	-----	11.1	7.3	-----	11.1	10.0	-----
Hysterectomy	4	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



TAZEWELL COMMUNITY HOSPITAL

Medicare Provider Number: 490117

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.5 years
Proportion female	56.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.3 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	12.4 %

COMORBIDITIES:

Cancer	4.2 %
Chronic cardiovascular disease	36.9 %
Chronic liver disease	0.7 %
Chronic renal disease	1.3 %
Chronic pulmonary disease	28.3 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	16.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.6%
State	3.6%
Outside State	11.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	56
Occupancy Rate	39.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	53.0 %
Case Mix Index (CMI)	1.0422

STAFFING:

Total Number of Physicians	13
Percent of Physicians Board Certified Specialists	69.2 %
Medical Residents/Interns	0
Registered Nurses	30
Licensed Practical Nurses	19

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

TWIN COUNTY COMMUNITY HOSPITAL

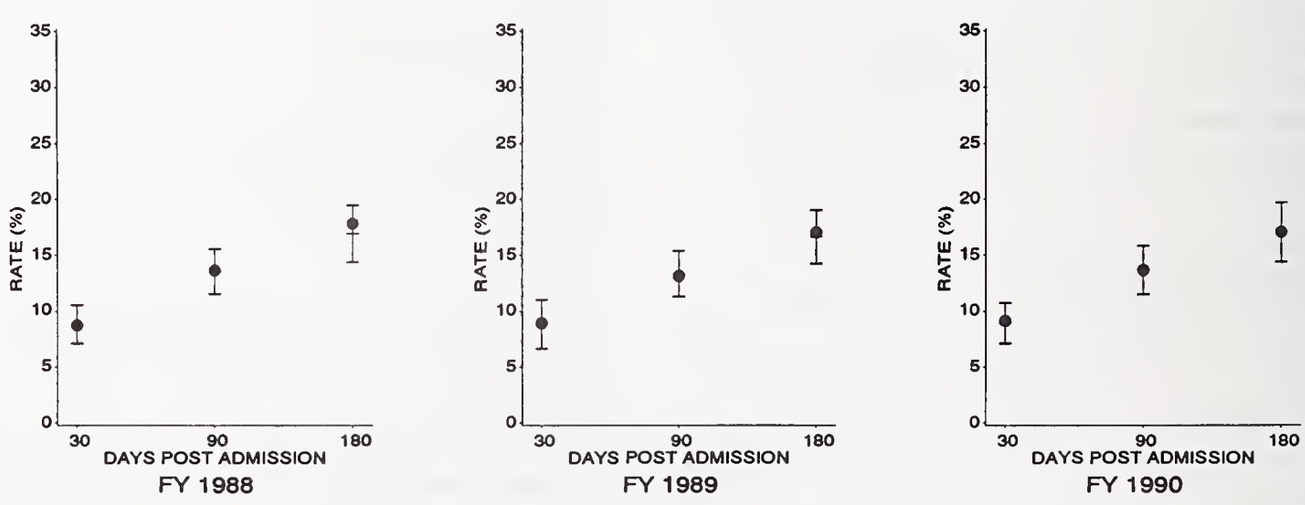
200 HOSPITAL DRIVE
GALAX, VA 24333
Medicare Provider Number: 490115

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1305	9.1	8.9	0.9	13.6	13.6	1.1	17.0	17.0	1.3
CONDITIONS:										
Acute Myocardial Infarction	38	28.9	27.8	-----	39.5	31.0	-----	42.1	33.9	-----
Congestive Heart Failure	51	11.8	15.2	8.9	15.7	24.1	12.0	29.4	30.2	10.8
Pneumonia/Influenza	65	9.2	14.6	7.4	10.8	20.1	9.5	15.4	23.8	9.7
Chronic Obstructive Pulmonary Disease	5	0.0	4.7	-----	0.0	8.1	-----	0.0	11.4	-----
Transient Cerebral Ischemia	22	0.0	2.0	-----	0.0	4.6	-----	0.0	7.4	-----
Stroke	46	37.0	20.9	-----	45.7	27.5	-----	47.8	31.2	-----
Hip Fracture	68	8.8	5.1	5.0	11.8	9.3	5.1	13.2	12.5	5.1
Sepsis	6	33.3	24.7	-----	50.0	30.7	-----	50.0	34.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	10	0.0	4.7	-----	30.0	9.3	-----	30.0	13.2	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	40	7.5	3.0	-----	7.5	5.9	-----	7.5	8.4	-----
Open Reduction of Hip Fracture	28	7.1	5.2	-----	7.1	9.6	-----	10.7	12.9	-----
Prostatectomy	20	0.0	1.4	-----	0.0	3.0	-----	0.0	5.0	-----
Cholecystectomy	31	3.2	3.0	-----	6.5	5.2	-----	6.5	6.6	-----
Hysterectomy	8	0.0	0.3	-----	0.0	0.7	-----	0.0	1.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



TWIN COUNTY COMMUNITY HOSPITAL

Medicare Provider Number: 490115

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	58.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	29.7 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.1 %
Admitted for emergency	67.0 %

COMORBIDITIES:

Cancer	6.7 %
Chronic cardiovascular disease	30.8 %
Chronic liver disease	0.8 %
Chronic renal disease	1.1 %
Chronic pulmonary disease	15.7 %
Cerebrovascular degeneration	6.8 %
Diabetes mellitus	7.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	33.4%
State	61.7%
Outside State	4.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.1 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	149
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	48.8 %
Case Mix Index (CMI)	1.1629

STAFFING:

Total Number of Physicians	37
Percent of Physicians Board Certified Specialists	83.8 %
Medical Residents/Interns	0
Registered Nurses	106
Licensed Practical Nurses	83

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

UNIVERSITY OF VIRGINIA HOSPITAL

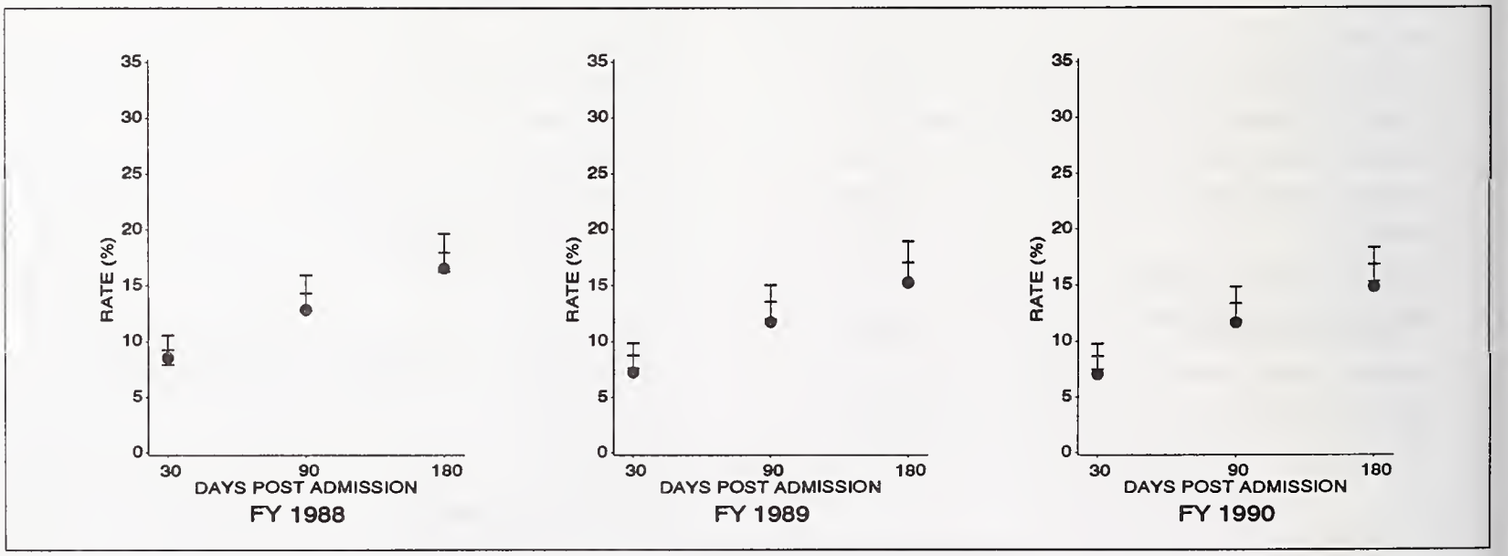
JEFFERSON PARK AVE
CHARLOTTESVILLE, VA 22901
Medicare Provider Number: 490009

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3873	7.0	8.6	0.6	11.6	13.3	0.8	14.8	16.8	0.8
CONDITIONS:										
Acute Myocardial Infarction	73	21.9	26.3	6.1	26.0	29.0	5.9	34.2	31.7	6.6
Congestive Heart Failure	112	8.9	13.9	4.4	17.0	22.5	5.9	18.8	28.9	7.5
Pneumonia/Influenza	89	19.1	15.6	4.8	23.6	21.4	5.2	30.3	25.1	7.3
Chronic Obstructive Pulmonary Disease	19	10.5	7.0	-----	26.3	12.9	-----	36.8	17.7	-----
Transient Cerebral Ischemia	51	0.0	2.0	2.8	2.0	4.1	3.5	2.0	6.3	5.5
Stroke	106	12.3	19.8	5.6	15.1	25.6	6.6	17.0	28.8	6.9
Hip Fracture	46	2.2	5.0	-----	4.3	9.1	-----	6.5	11.9	-----
Sepsis	21	42.9	30.0	-----	47.6	37.5	-----	52.4	41.8	-----
PROCEDURES:										
Angioplasty	59	5.1	4.3	2.9	6.8	5.7	3.5	10.2	6.8	4.5
Coronary Artery Bypass Graft	113	8.0	7.3	2.6	11.5	10.1	3.9	13.3	11.4	4.6
Initial Pacemaker Insertion	25	0.0	2.6	-----	0.0	5.6	-----	8.0	8.6	-----
Carotid Endarterectomy	32	0.0	1.7	-----	3.1	3.0	-----	3.1	4.2	-----
Hip Replacement/Reconstruction	78	0.0	1.8	2.4	1.3	3.7	3.6	2.6	5.2	3.9
Open Reduction of Hip Fracture	18	5.6	5.1	-----	11.1	9.3	-----	11.1	12.2	-----
Prostatectomy	50	0.0	0.9	-----	0.0	2.2	-----	0.0	3.8	-----
Cholecystectomy	43	2.3	2.7	-----	4.7	5.1	-----	4.7	6.9	-----
Hysterectomy	49	0.0	0.9	-----	0.0	2.0	-----	2.0	3.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNIVERSITY OF VIRGINIA HOSPITAL

Medicare Provider Number: 490009

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	69.0 years
Proportion female	47.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	29.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	19.1 %
Admitted for emergency	51.5 %

COMORBIDITIES:

Cancer	9.2 %
Chronic cardiovascular disease	32.1 %
Chronic liver disease	0.9 %
Chronic renal disease	5.3 %
Chronic pulmonary disease	10.0 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	9.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	11.1%
State	79.3%
Outside State	9.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	678
Occupancy Rate	82.0 %
Ownership/Control	State Government
Medicare Discharges	26.8 %
Case Mix Index (CMI)	1.5788

STAFFING:

Total Number of Physicians	389
Percent of Physicians Board Certified Specialists	79.2 %
Medical Residents/Interns	536
Registered Nurses	1092
Licensed Practical Nurses	109

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

VIRGINIA BAPTIST HOSPITAL

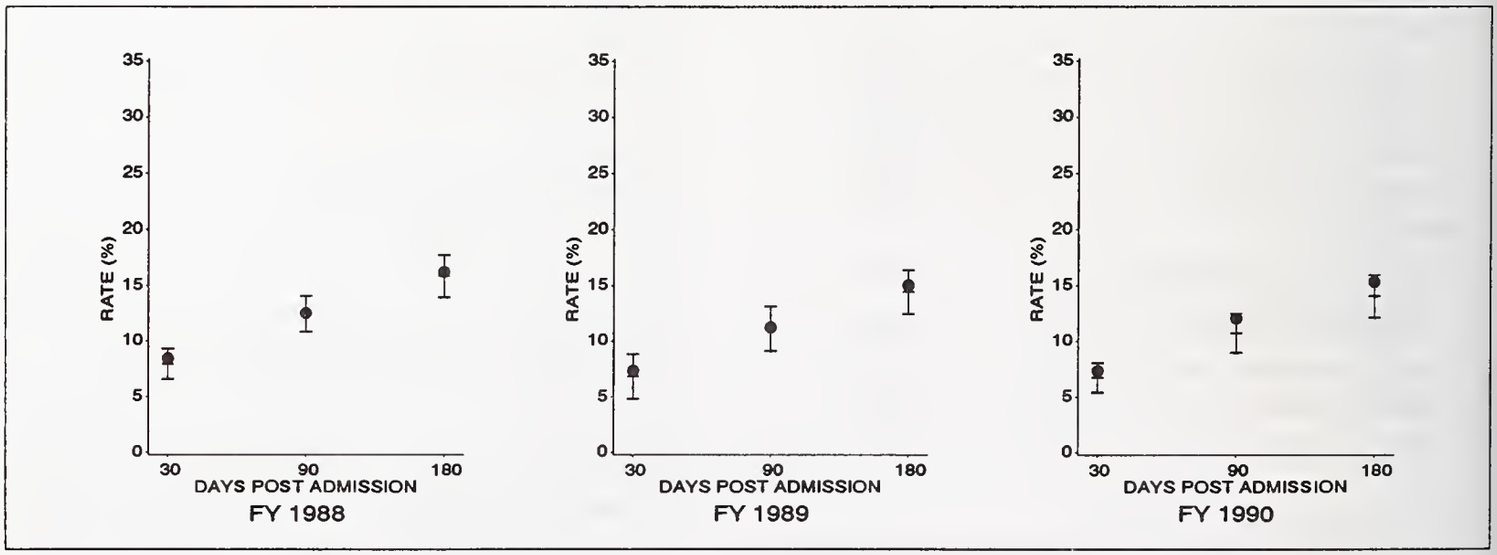
3300 RIVERMONT AVE
LYNCHBURG, VA 24503
Medicare Provider Number: 490021

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1881	7.3	6.7	0.7	12.0	10.7	0.9	15.3	14.0	1.0
CONDITIONS:										
Acute Myocardial Infarction	70	10.0	23.3	7.4	12.9	25.9	7.9	15.7	28.9	8.3
Congestive Heart Failure	80	5.0	12.1	4.7	15.0	19.9	5.1	25.0	25.8	5.1
Pneumonia/Influenza	92	15.2	11.6	4.8	16.3	16.3	4.4	20.7	19.7	4.8
Chronic Obstructive Pulmonary Disease	19	10.5	4.7	-----	21.1	8.9	-----	26.3	12.4	-----
Transient Cerebral Ischemia	26	0.0	1.6	-----	11.5	3.9	-----	15.4	6.7	-----
Stroke	66	13.6	13.4	6.2	21.2	18.7	5.8	21.2	22.3	6.5
Hip Fracture	1	100.0	4.4	-----	100.0	10.0	-----	100.0	15.4	-----
Sepsis	16	18.8	28.1	-----	25.0	34.6	-----	31.3	38.5	-----
PROCEDURES:										
Angioplasty	19	0.0	4.2	-----	0.0	5.1	-----	0.0	6.1	-----
Coronary Artery Bypass Graft	89	2.2	4.8	3.1	2.2	6.6	4.1	3.4	7.5	4.6
Initial Pacemaker Insertion	18	0.0	2.1	-----	5.6	4.3	-----	5.6	6.3	-----
Carotid Endarterectomy	1	0.0	0.6	-----	0.0	1.2	-----	0.0	1.9	-----
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	48	0.0	1.1	-----	0.0	2.6	-----	4.2	4.5	-----
Cholecystectomy	38	0.0	2.3	-----	0.0	4.6	-----	0.0	6.4	-----
Hysterectomy	29	0.0	0.2	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



VIRGINIA BAPTIST HOSPITAL

Medicare Provider Number: 490021

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	56.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	76.8 %
Transferred from skilled nursing facility	0.3 %
Admitted for elective procedure	68.7 %
Admitted for emergency	11.2 %

COMORBIDITIES:

Cancer	8.8 %
Chronic cardiovascular disease	33.0 %
Chronic liver disease	0.7 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	10.3 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	6.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	47.7%
State	50.9%
Outside State	1.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.8 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	354
Occupancy Rate	71.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	28.9 %
Case Mix Index (CMI)	1.3392

STAFFING:

Total Number of Physicians	169
Percent of Physicians Board Certified Specialists	88.8 %
Medical Residents/Interns	0
Registered Nurses	332
Licensed Practical Nurses	35

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

VIRGINIA BEACH GENERAL HOSPITAL

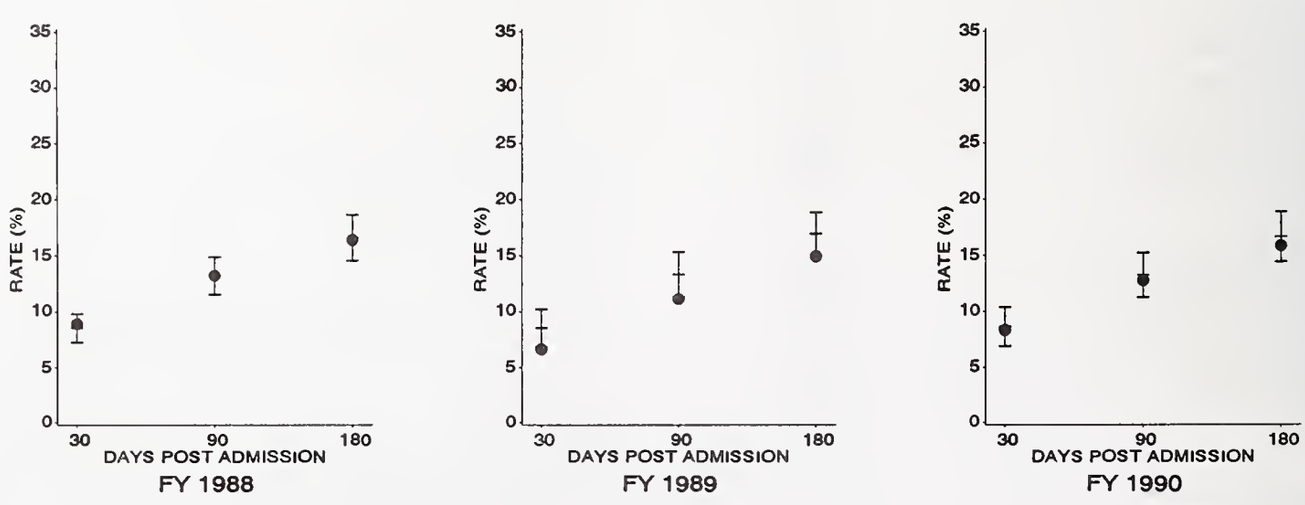
1060 FIRST COLONIAL RD
VIRGINIA BEACH, VA 23454
Medicare Provider Number: 490057

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2539	8.3	8.6	0.9	12.7	13.2	1.0	15.8	16.6	1.1
CONDITIONS:										
Acute Myocardial Infarction	52	23.1	24.8	7.6	32.7	27.9	7.3	36.5	30.6	7.3
Congestive Heart Failure	136	17.6	14.1	4.0	23.5	22.3	3.7	25.7	28.4	4.4
Pneumonia/Influenza	113	20.4	16.4	4.1	23.9	22.5	4.2	27.4	26.4	4.7
Chronic Obstructive Pulmonary Disease	31	16.1	6.8	-----	25.8	12.4	-----	25.8	16.5	-----
Transient Cerebral Ischemia	35	2.9	2.1	-----	2.9	4.7	-----	5.7	7.8	-----
Stroke	66	21.2	21.9	6.2	30.3	28.9	7.4	34.8	32.7	9.8
Hip Fracture	79	6.3	7.0	2.9	11.4	12.4	5.8	13.9	16.0	6.4
Sepsis	18	11.1	24.3	-----	27.8	31.9	-----	33.3	36.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	24	0.0	2.1	-----	0.0	4.1	-----	0.0	6.2	-----
Carotid Endarterectomy	29	0.0	1.6	-----	3.4	2.9	-----	6.9	4.2	-----
Hip Replacement/Reconstruction	54	3.7	4.2	2.8	5.6	7.9	4.5	7.4	10.5	5.5
Open Reduction of Hip Fracture	35	2.9	6.0	-----	8.6	11.0	-----	14.3	14.6	-----
Prostatectomy	73	0.0	0.7	1.2	1.4	1.8	1.6	1.4	3.0	2.4
Cholecystectomy	44	0.0	3.1	-----	9.1	5.5	-----	9.1	7.1	-----
Hysterectomy	18	0.0	0.7	-----	0.0	1.5	-----	0.0	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



VIRGINIA BEACH GENERAL HOSPITAL

Medicare Provider Number: 490057

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.9 years
Proportion female	57.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	48.0 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	21.9 %
Admitted for emergency	74.3 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	32.7 %
Chronic liver disease	1.3 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	21.1 %
Cerebrovascular degeneration	4.1 %
Diabetes mellitus	6.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.0%
State	9.3%
Outside State	7.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	230
Occupancy Rate	88.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	28.9 %
Case Mix Index (CMI)	1.2137

STAFFING:

Total Number of Physicians	276
Percent of Physicians Board Certified Specialists	91.7 %
Medical Residents/Interns	0
Registered Nurses	225
Licensed Practical Nurses	57

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WARREN MEMORIAL HOSPITAL

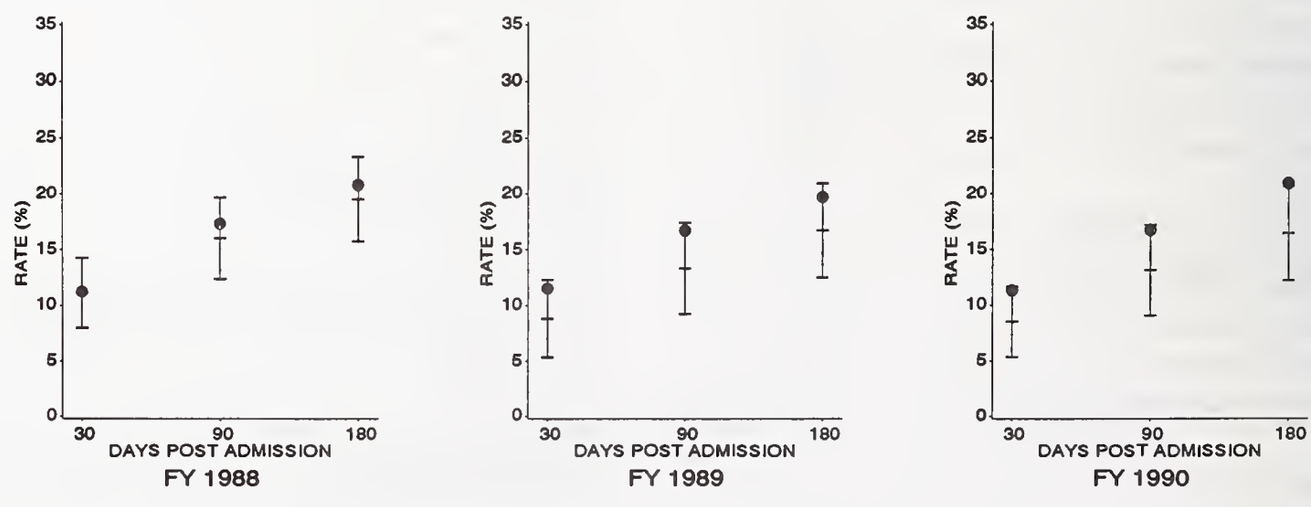
1000 SHENANDOAH AVE
FRONT ROYAL, VA 22630
Medicare Provider Number: 490033

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	609	11.3	8.5	1.6	16.7	13.1	2.0	20.9	16.4	2.1
CONDITIONS:										
Acute Myocardial Infarction	21	38.1	21.1	-----	38.1	23.9	-----	38.1	26.1	-----
Congestive Heart Failure	33	9.1	14.4	-----	27.3	22.4	-----	30.3	28.3	-----
Pneumonia/Influenza	53	20.8	14.4	5.1	20.8	20.2	5.6	26.4	24.6	6.4
Chronic Obstructive Pulmonary Disease	4	0.0	8.4	-----	0.0	15.3	-----	25.0	20.6	-----
Transient Cerebral Ischemia	11	0.0	0.8	-----	0.0	2.1	-----	9.1	3.6	-----
Stroke	34	17.6	14.0	-----	32.4	20.6	-----	35.3	24.4	-----
Hip Fracture	18	16.7	5.1	-----	27.8	9.6	-----	27.8	12.7	-----
Sepsis	5	20.0	35.6	-----	20.0	49.1	-----	20.0	55.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	4	0.0	3.3	-----	0.0	6.7	-----	0.0	10.3	-----
Carotid Endarterectomy	5	0.0	0.9	-----	0.0	1.8	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	10	20.0	2.6	-----	30.0	5.1	-----	30.0	7.2	-----
Open Reduction of Hip Fracture	6	33.3	7.7	-----	50.0	15.0	-----	50.0	19.8	-----
Prostatectomy	8	0.0	0.8	-----	0.0	1.8	-----	0.0	2.9	-----
Cholecystectomy	13	0.0	1.7	-----	0.0	3.1	-----	0.0	4.1	-----
Hysterectomy	5	0.0	0.4	-----	0.0	0.8	-----	20.0	1.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WARREN MEMORIAL HOSPITAL

Medicare Provider Number: 490033

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	59.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	36.2 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	78.4 %
Admitted for emergency	19.2 %

COMORBIDITIES:

Cancer	7.7 %
Chronic cardiovascular disease	37.4 %
Chronic liver disease	1.5 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	17.7 %
Cerebrovascular degeneration	3.1 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	79.4%
State	18.2%
Outside State	2.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	112
Occupancy Rate	63.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	42.4 %
Case Mix Index (CMI)	1.2213

STAFFING:

Total Number of Physicians	37
Percent of Physicians Board Certified Specialists	83.8 %
Medical Residents/Interns	0
Registered Nurses	61
Licensed Practical Nurses	31

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

WESTERN STATE HOSPITAL

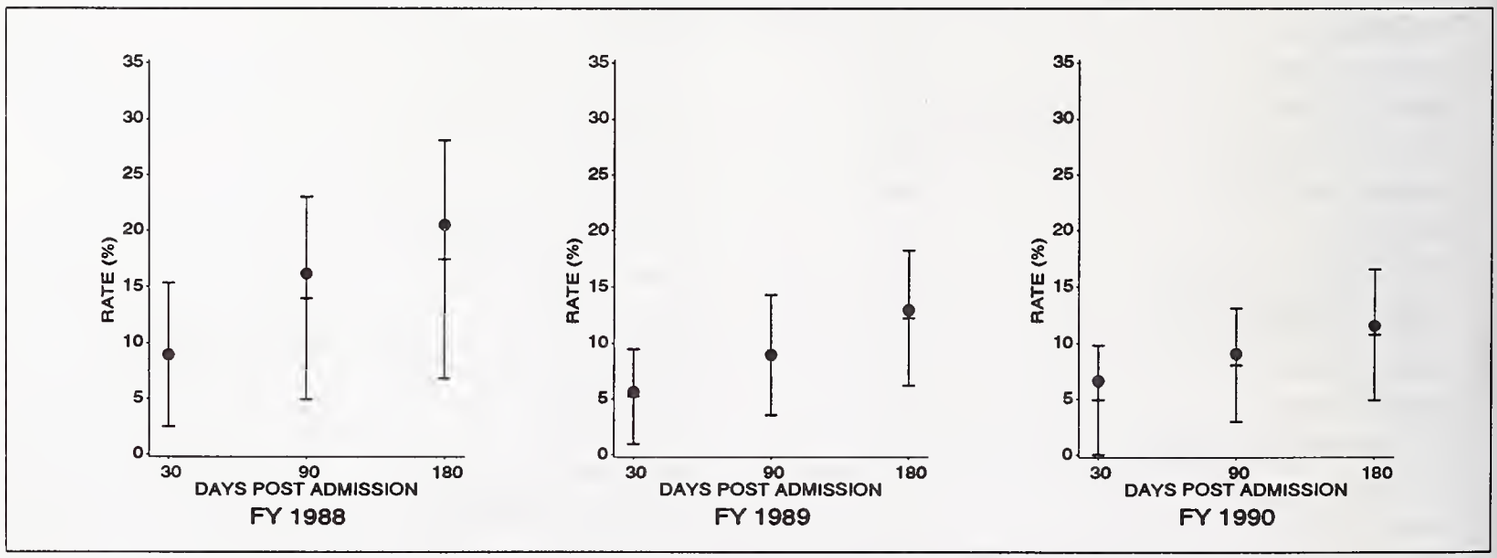
PO BOX 2500
STAUNTON, VA 24401
Medicare Provider Number: 490106

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	122	6.6	4.9	2.4	9.0	8.0	2.5	11.5	10.7	2.9
CONDITIONS:										
Acute Myocardial Infarction	1	100.0	13.9	-----	100.0	16.0	-----	100.0	19.0	-----
Congestive Heart Failure	1	0.0	13.3	-----	0.0	20.2	-----	0.0	28.0	-----
Pneumonia/Influenza	12	16.7	9.4	-----	16.7	13.2	-----	16.7	15.6	-----
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	1	0.0	1.2	-----	0.0	3.0	-----	0.0	5.1	-----
Stroke	1	0.0	16.0	-----	0.0	21.8	-----	0.0	24.4	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WESTERN STATE HOSPITAL
Medicare Provider Number: 490106

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	61.2 years
Proportion female	46.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	0.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.8 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	4.1 %
Chronic cardiovascular disease	12.2 %
Chronic liver disease	1.6 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	8.1 %
Cerebrovascular degeneration	37.4 %
Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	50.3%
State	48.0%
Outside State	1.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	14.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	682
Occupancy Rate	91.0 %
Ownership/Control	State Government
Medicare Discharges	22.9 %
Case Mix Index (CMI)	0.7966

STAFFING:

Total Number of Physicians	23
Percent of Physicians Board Certified Specialists	56.5 %
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WILLIAMSBURG COMMUNITY HOSPITAL

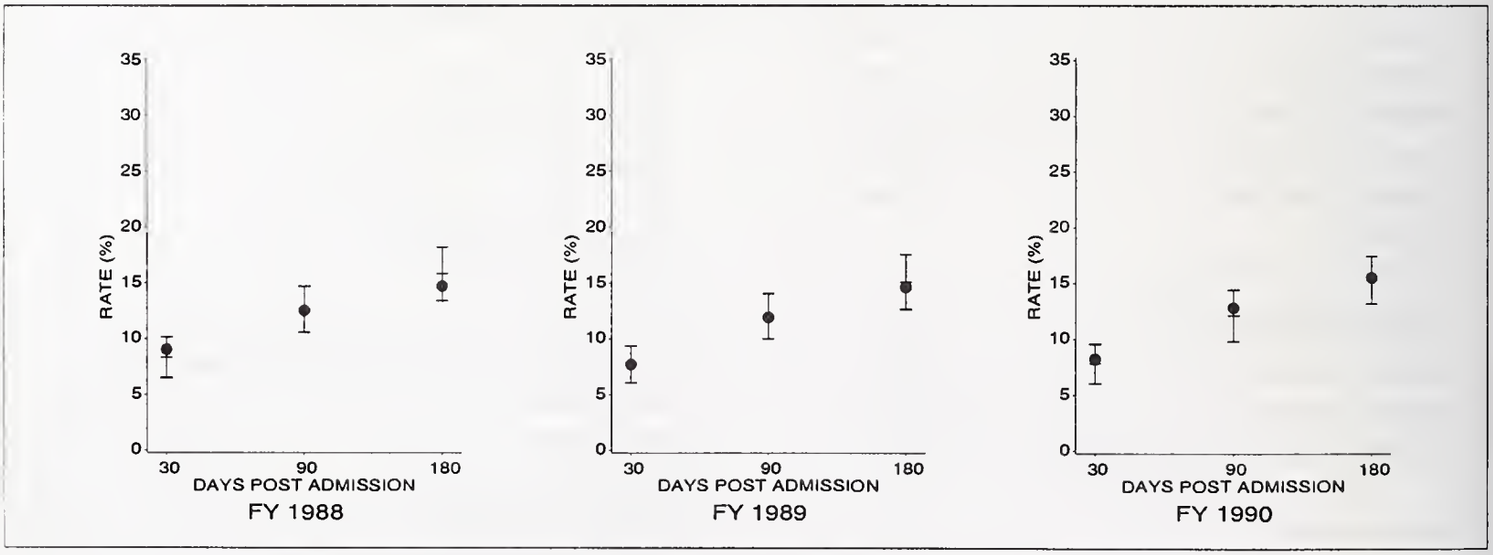
1238 MOUNT VERNON AVENUE
WILLIAMSBURG, VA 23185
Medicare Provider Number: 490066

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1165	8.2	7.8	0.9	12.8	12.1	1.2	15.5	15.3	1.1
CONDITIONS:										
Acute Myocardial Infarction	48	25.0	19.7	-----	29.2	22.5	-----	31.3	24.9	-----
Congestive Heart Failure	53	13.2	15.0	5.4	26.4	23.5	6.1	32.1	29.7	6.6
Pneumonia/Influenza	50	20.0	13.8	-----	22.0	19.7	-----	24.0	23.3	-----
Chronic Obstructive Pulmonary Disease	5	0.0	5.9	-----	0.0	10.6	-----	0.0	15.2	-----
Transient Cerebral Ischemia	12	8.3	1.8	-----	8.3	4.2	-----	8.3	6.8	-----
Stroke	38	15.8	18.9	-----	23.7	25.8	-----	28.9	29.9	-----
Hip Fracture	33	0.0	5.5	-----	6.1	10.1	-----	15.2	13.4	-----
Sepsis	14	21.4	26.8	-----	42.9	32.5	-----	42.9	36.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	6	16.7	2.6	-----	16.7	5.6	-----	16.7	8.3	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	25	0.0	4.7	-----	0.0	7.6	-----	4.0	9.8	-----
Open Reduction of Hip Fracture	15	0.0	4.5	-----	6.7	8.8	-----	13.3	12.1	-----
Prostatectomy	77	0.0	0.7	2.0	2.6	1.7	2.6	5.2	2.9	3.5
Cholecystectomy	13	0.0	2.2	-----	0.0	3.5	-----	0.0	4.3	-----
Hysterectomy	4	0.0	1.2	-----	0.0	2.9	-----	0.0	4.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WILLIAMSBURG COMMUNITY HOSPITAL

Medicare Provider Number: 490066

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.8 years
Proportion female	52.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.9 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	16.0 %
Admitted for emergency	18.3 %

COMORBIDITIES:

Cancer	6.1 %
Chronic cardiovascular disease	25.7 %
Chronic liver disease	0.7 %
Chronic renal disease	1.5 %
Chronic pulmonary disease	10.6 %
Cerebrovascular degeneration	6.1 %
Diabetes mellitus	6.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	52.5%
State	40.6%
Outside State	6.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.3 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	109
Occupancy Rate	67.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.8 %
Case Mix Index (CMI)	1.0759

STAFFING:

Total Number of Physicians	77
Percent of Physicians Board Certified Specialists	92.2 %
Medical Residents/Interns	0
Registered Nurses	128
Licensed Practical Nurses	18

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WINCHESTER MEDICAL CENTER INC

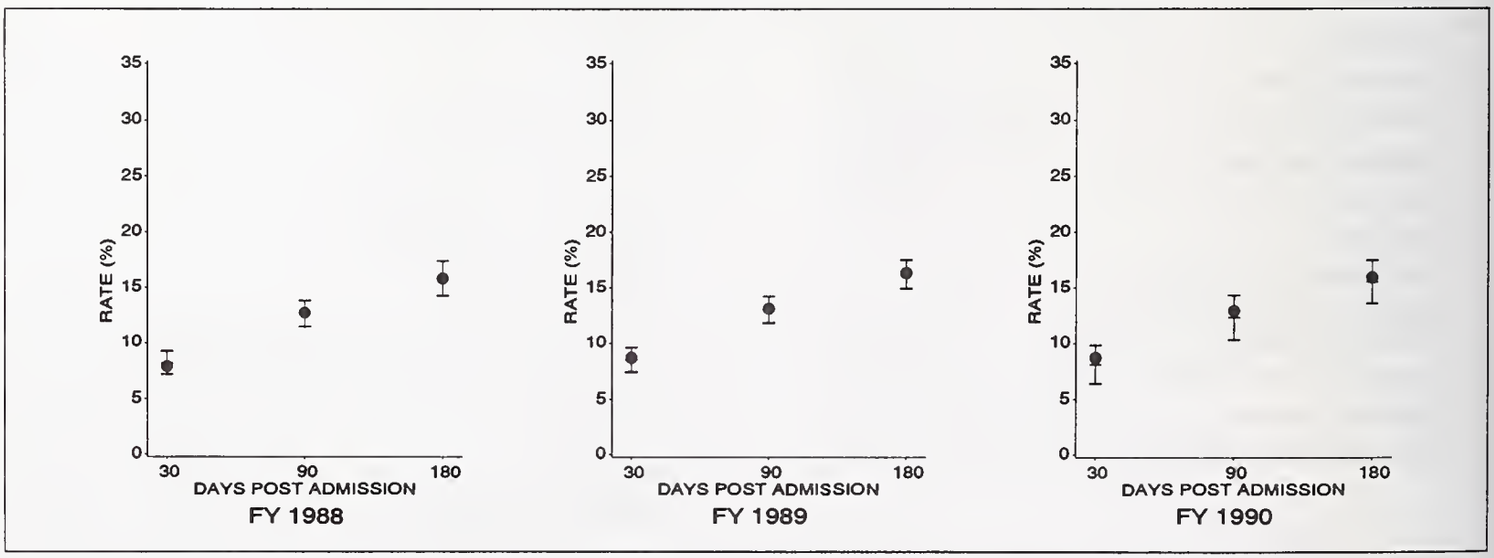
1840 AMHERST ST
WINCHESTER, VA 22601
Medicare Provider Number: 490005

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3306	8.7	8.1	0.8	12.9	12.3	1.0	15.9	15.5	1.0
CONDITIONS:										
Acute Myocardial Infarction	128	21.1	24.3	6.0	23.4	27.3	5.8	28.1	29.9	5.4
Congestive Heart Failure	186	14.5	14.9	3.0	25.3	23.1	5.0	33.3	29.3	5.5
Pneumonia/Influenza	127	12.6	13.2	3.1	22.8	18.7	5.3	26.8	22.2	6.3
Chronic Obstructive Pulmonary Disease	70	8.6	6.2	3.2	10.0	11.6	3.9	12.9	16.1	5.0
Transient Cerebral Ischemia	51	3.9	1.4	3.1	5.9	3.3	4.0	7.8	5.5	5.4
Stroke	148	13.5	16.4	3.2	18.9	22.3	3.7	26.4	25.7	4.1
Hip Fracture	75	1.3	5.8	3.5	2.7	10.4	5.0	4.0	13.5	6.0
Sepsis	63	27.0	19.9	6.4	30.2	26.5	6.5	31.7	30.5	6.1
PROCEDURES:										
Angioplasty	53	5.7	4.1	3.0	5.7	4.9	3.1	5.7	5.7	3.3
Coronary Artery Bypass Graft	89	12.4	5.5	5.2	13.5	7.7	5.2	13.5	8.7	5.3
Initial Pacemaker Insertion	31	12.9	3.4	-----	12.9	6.7	-----	16.1	9.4	-----
Carotid Endarterectomy	8	0.0	0.9	-----	0.0	1.6	-----	0.0	2.4	-----
Hip Replacement/Reconstruction	83	2.4	2.8	1.9	2.4	5.2	3.0	2.4	6.8	3.7
Open Reduction of Hip Fracture	33	0.0	6.3	-----	3.0	11.3	-----	6.1	14.9	-----
Prostatectomy	73	1.4	0.7	1.5	4.1	1.6	2.7	5.5	2.7	3.5
Cholecystectomy	47	4.3	2.4	-----	4.3	4.6	-----	4.3	6.6	-----
Hysterectomy	25	0.0	0.3	-----	4.0	0.7	-----	4.0	1.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WINCHESTER MEDICAL CENTER INC

Medicare Provider Number: 490005

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.1 years
Proportion female	53.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.6 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	22.1 %
Admitted for emergency	25.8 %

COMORBIDITIES:

Cancer	7.2 %
Chronic cardiovascular disease	30.9 %
Chronic liver disease	0.8 %
Chronic renal disease	3.0 %
Chronic pulmonary disease	16.6 %
Cerebrovascular degeneration	3.1 %
Diabetes mellitus	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	23.3%
State	46.9%
Outside State	29.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.5 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	350
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	33.0 %
Case Mix Index (CMI)	1.4040

STAFFING:

Total Number of Physicians	158
Percent of Physicians Board Certified Specialists	85.4 %
Medical Residents/Interns	0
Registered Nurses	337
Licensed Practical Nurses	80

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WISE APPALACHIAN REGIONAL HOSPITAL

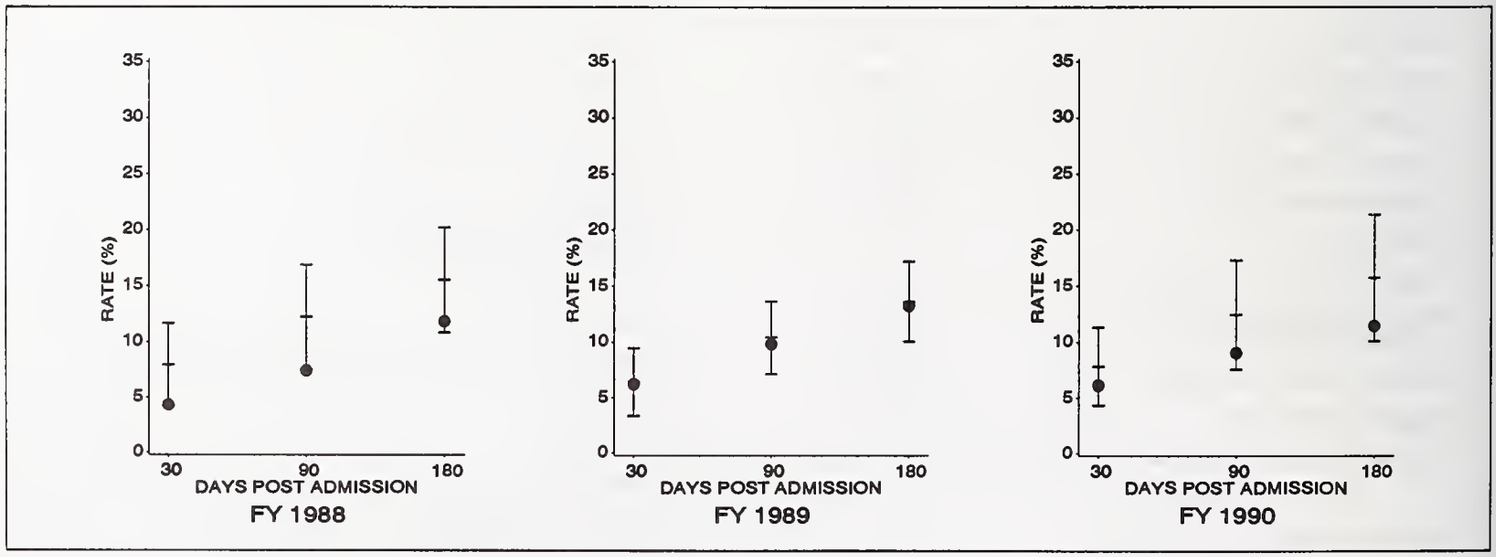
NORTON ROAD, BOX 3267
WISE, VA 24293
Medicare Provider Number: 490010

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	343	6.1	7.8	1.7	9.0	12.4	2.4	11.4	15.7	2.8
CONDITIONS:										
Acute Myocardial Infarction	6	0.0	9.0	-----	0.0	12.6	-----	0.0	15.6	-----
Congestive Heart Failure	12	0.0	14.9	-----	8.3	23.7	-----	8.3	29.7	-----
Pneumonia/Influenza	17	11.8	12.6	-----	11.8	17.0	-----	11.8	20.0	-----
Chronic Obstructive Pulmonary Disease	18	11.1	10.0	-----	16.7	17.9	-----	22.2	23.7	-----
Transient Cerebral Ischemia	1	0.0	2.0	-----	0.0	4.7	-----	0.0	7.1	-----
Stroke	5	0.0	23.8	-----	0.0	28.7	-----	0.0	32.2	-----
Hip Fracture	27	7.4	4.9	-----	7.4	8.9	-----	11.1	11.7	-----
Sepsis	4	0.0	31.5	-----	0.0	40.5	-----	0.0	46.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	9	11.1	3.1	-----	11.1	5.9	-----	11.1	8.0	-----
Open Reduction of Hip Fracture	19	5.3	4.8	-----	5.3	8.9	-----	10.5	11.8	-----
Prostatectomy	8	0.0	0.9	-----	12.5	2.0	-----	12.5	3.4	-----
Cholecystectomy	7	0.0	1.0	-----	0.0	1.9	-----	0.0	2.6	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WISE APPALACHIAN REGIONAL HOSPITAL

Medicare Provider Number: 490010

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.6 years
Proportion female	48.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	11.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	56.6 %

COMORBIDITIES:

Cancer	3.5 %
Chronic cardiovascular disease	38.5 %
Chronic liver disease	1.5 %
Chronic renal disease	1.5 %
Chronic pulmonary disease	39.4 %
Cerebrovascular degeneration	1.5 %
Diabetes mellitus	13.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	57.4%
State	28.0%
Outside State	14.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.6 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	67
Occupancy Rate	40.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.4 %
Case Mix Index (CMI)	1.2488

STAFFING:

Total Number of Physicians	17
Percent of Physicians Board Certified Specialists	70.6 %
Medical Residents/Interns	0
Registered Nurses	33
Licensed Practical Nurses	32

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

WYTHE COUNTY COMMUNITY HOSPITAL

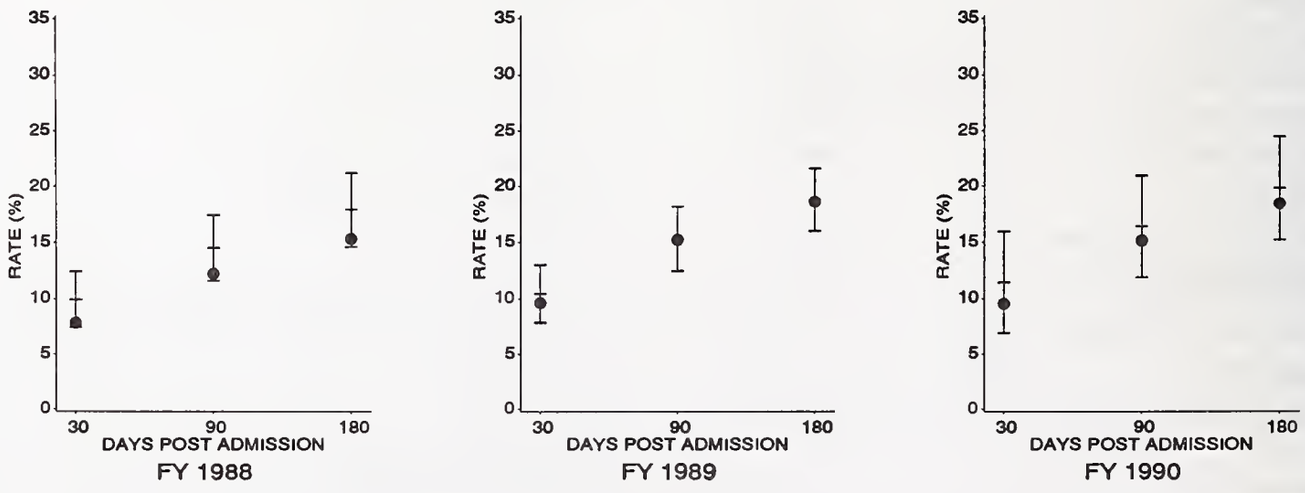
600 W RIDGE RD
WYTHEVILLE, VA 24382
Medicare Provider Number: 490111

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	846	9.5	11.4	2.3	15.1	16.4	2.3	18.4	19.8	2.3
CONDITIONS:										
Acute Myocardial Infarction	46	32.6	30.1	-----	34.8	32.3	-----	37.0	34.8	-----
Congestive Heart Failure	41	12.2	13.7	-----	12.2	21.5	-----	19.5	27.2	-----
Pneumonia/Influenza	157	10.2	17.0	4.4	18.5	23.7	4.3	21.7	28.0	4.7
Chronic Obstructive Pulmonary Disease	11	0.0	4.9	-----	9.1	9.3	-----	18.2	13.1	-----
Transient Cerebral Ischemia	24	0.0	1.2	-----	0.0	2.8	-----	0.0	4.7	-----
Stroke	52	23.1	18.9	6.1	32.7	25.7	7.2	38.5	29.5	8.4
Hip Fracture	0									
Sepsis	16	31.3	24.3	-----	37.5	32.0	-----	37.5	36.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	50.0	10.8	-----	50.0	15.0	-----	50.0	17.2	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	18	0.0	1.2	-----	0.0	2.8	-----	0.0	4.9	-----
Cholecystectomy	15	0.0	1.3	-----	0.0	2.3	-----	0.0	3.0	-----
Hysterectomy	5	0.0	0.7	-----	0.0	1.4	-----	0.0	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WYTHE COUNTY COMMUNITY HOSPITAL

Medicare Provider Number: 490111

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.8 years
Proportion female	58.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	35.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	5.9 %
Admitted for emergency	61.5 %

COMORBIDITIES:

Cancer	5.4 %
Chronic cardiovascular disease	47.3 %
Chronic liver disease	0.7 %
Chronic renal disease	2.4 %
Chronic pulmonary disease	20.9 %
Cerebrovascular degeneration	7.0 %
Diabetes mellitus	9.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	78.3%
State	18.2%
Outside State	3.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	8.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	106
Occupancy Rate	58.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	42.2 %
Case Mix Index (CMI)	1.1347

STAFFING:

Total Number of Physicians	23
Percent of Physicians Board Certified Specialists	60.9 %
Medical Residents/Interns	0
Registered Nurses	87
Licensed Practical Nurses	23

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

VIRGINIA

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	147,150	8.5	8.6	0.1	13.3	13.2	0.2	16.6	16.6	0.1
CONDITIONS:										
Acute Myocardial Infarction	4,320	24.1	25.7	1.2	28.1	28.7	1.5	30.6	31.4	1.4
Congestive Heart Failure	7,044	12.8	14.1	0.6	21.2	22.4	0.6	27.3	28.5	0.6
Pneumonia/Influenza	6,595	14.3	14.9	0.7	20.3	20.6	1.1	24.3	24.4	1.2
Chronic Obstructive Pulmonary Disease	2,286	7.1	7.0	0.6	13.1	12.6	0.9	18.3	16.9	1.3
Transient Cerebral Ischemia	2,255	1.3	1.7	0.4	3.2	3.8	0.6	4.9	6.2	0.9
Stroke	5,629	18.4	19.2	0.7	25.4	25.4	0.6	29.1	29.2	0.6
Hip Fracture	3,461	6.1	6.1	0.4	10.7	10.8	0.7	13.7	14.2	0.7
Sepsis	1,696	25.2	25.4	1.1	33.8	33.1	1.8	38.7	37.8	2.5
PROCEDURES:										
Angioplasty	913	3.1	3.4	1.0	3.9	4.4	0.9	5.0	5.4	0.9
Coronary Artery Bypass Graft	1,686	5.6	6.0	1.1	7.6	8.5	1.3	8.6	9.7	1.3
Initial Pacemaker Insertion	943	3.2	3.4	0.6	6.2	6.5	1.0	8.5	9.3	1.4
Carotid Endarterectomy	549	1.1	1.4	0.7	2.4	2.7	0.8	3.5	3.9	1.0
Hip Replacement/Reconstruction	2,564	3.4	3.0	0.4	5.9	5.7	0.6	7.6	7.7	0.6
Open Reduction of Hip Fracture	1,616	5.8	5.7	0.9	11.1	10.5	0.9	13.9	14.0	0.9
Prostatectomy	3,668	0.8	0.9	0.2	2.4	2.2	0.3	4.2	3.7	0.4
Cholecystectomy	2,536	2.8	2.5	0.8	4.6	4.6	0.9	6.0	6.1	0.8
Hysterectomy	1,137	0.5	0.5	0.4	1.1	1.2	0.5	1.8	1.9	0.6

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.4 years
Proportion female	56.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.5 %
Transferred from skilled nursing facility	0.6 %
Admitted for elective procedure	21.5 %
Admitted for emergency	47.3 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	31.8 %
Chronic liver disease	1.0 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	14.9 %
Cerebrovascular degeneration	4.7 %
Diabetes mellitus	8.3 %

ALL STATES

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	6,542,299	9.0	9.0	-----	13.9	13.7	-----	17.3	17.1	-----
CONDITIONS:										
Acute Myocardial Infarction	204,673	25.3	25.6	-----	29.5	28.7	-----	32.1	31.4	-----
Congestive Heart Failure	335,426	14.3	14.4	-----	22.9	22.8	-----	29.2	29.0	-----
Pneumonia/Influenza	313,303	15.3	15.5	-----	21.5	21.3	-----	25.5	25.1	-----
Chronic Obstructive Pulmonary Disease	107,387	8.0	8.0	-----	14.1	14.0	-----	18.7	18.5	-----
Transient Cerebral Ischemia	96,866	1.8	1.8	-----	4.0	4.0	-----	6.4	6.5	-----
Stroke	241,803	19.7	19.8	-----	26.5	26.3	-----	30.4	30.0	-----
Hip Fracture	163,386	6.7	6.5	-----	11.7	11.5	-----	15.1	15.0	-----
Sepsis	80,999	25.6	25.7	-----	34.6	33.8	-----	39.8	38.6	-----
PROCEDURES:										
Angioplasty	58,026	3.0	3.0	-----	4.0	4.0	-----	5.0	4.9	-----
Coronary Artery Bypass Graft	80,798	6.0	5.7	-----	8.3	8.1	-----	9.5	9.2	-----
Initial Pacemaker Insertion	49,642	3.2	3.3	-----	6.5	6.3	-----	9.1	9.1	-----
Carotid Endarterectomy	29,990	1.6	1.5	-----	2.8	2.8	-----	4.0	4.1	-----
Hip Replacement/Reconstruction	122,156	3.4	3.2	-----	6.2	5.9	-----	8.1	8.0	-----
Open Reduction of Hip Fracture	80,075	6.1	6.0	-----	11.2	11.0	-----	14.5	14.5	-----
Prostatectomy	211,087	0.9	1.0	-----	2.2	2.3	-----	3.7	3.8	-----
Cholecystectomy	124,259	2.9	2.7	-----	5.0	4.9	-----	6.5	6.5	-----
Hysterectomy	53,905	0.7	0.7	-----	1.4	1.5	-----	2.2	2.4	-----

* The Standard Deviation (SD) is not calculated.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.1 years
Proportion female	55.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.1 %
Transferred from skilled nursing facility	1.1 %
Admitted for elective procedure	22.0 %
Admitted for emergency	46.5 %

COMORBIDITIES:

Cancer	7.6 %
Chronic cardiovascular disease	36.6 %
Chronic liver disease	1.0 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	15.0 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	8.0 %

Hospital Comments

THE ARLINGTON HOSPITAL
1701 NORTH GEORGE MASON DRIVE · ARLINGTON, VIRGINIA 22205-3698 · 703/558-5000

March 19, 1992 Medicare Provider 490050

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Ms. Wilensky:

The Arlington Hospital supports the concept of a well-informed public and appreciates the opportunity to help ensure the accuracy of the mortality data to be released.

This year we have some grave concerns about the accuracy of the Medicare mortality data for The Arlington Hospital as reported by HCFA. For two conditions in particular, we have recorded substantially more cases than reflected by the HCFA data. This factor alone greatly changes our observed mortality rates in these areas and brings us well within the predicted rates. In addition, we have reviewed all of the cases and are convinced of the appropriateness of the treatment received by these patients.

Let us first look at Acute Myocardial Infarction. HCFA reported 55 cases; our records reflect 82 cases, which brings our 30-day observed rate to 24.39 percent (vs. 36.4 percent), which is less than the predicted range of 25.7 percent. There are several other points we would like to make regarding these deaths. Fifty-five percent of the patients were more than 80 years old. Over half of the patients came to The Arlington Hospital after suffering cardiac arrest elsewhere and were resuscitated in the field. Most of them never regained consciousness and were not resuscitated further, at family request. Ninety percent of the deaths were "do not resuscitate" patients.

In the area of Chronic Obstructive Pulmonary Disease, we recorded 88 patients rather than 35. Again, with the larger sample, our observed mortality rate falls to 4.4 percent (for 30 days) instead of HCFAs reported 14.3 percent, which is substantially below the predicted range. After reviewing all of these cases, we want to emphasize the impact of the status of patients when admitted to the hospital. All were chronically ill, elderly patients. Ten of the 15 deaths occurred after discharge. These deaths were generally expected by family members who had requested that these patients be allowed to go home to die.

With the magnitude of the difference in case counts in these two areas, we are concerned about the data to be released and feel certain the case count may be off in other areas, not just for us but for other hospitals as well.

While we appreciate the changes you have made to improve the methodology, we hope you will once again look at how the statistics are derived and once again, ensure adequate factoring of age, acuity and comorbidities.

Although mortality review is an integral part of The Arlington Hospital's internal quality assurance program, it is only a part of a much larger quality assurance effort. Included in our comprehensive program are tissue review, surgical indications monitoring, pharmacy and therapeutics monitoring, medical records evaluation, blood-use monitoring, infection surveillance, screening for unexpected clinical occurrences, review of the utilization of hospital ancillary and clinical support services, analysis of and response to surveys, assessments and inspections by external accreditation, licensing, regulatory and reimbursement authorities, surveillance of equipment maintenance programs, and continuing education based on demonstrated need.

The Medical Society of Virginia Review Organization regularly reviews a sample of our Medicare cases and in fact reviewed most of the cases in this study. Medical care at The Arlington Hospital was found to be appropriate in all of these cases. Based on this and the results of our overall quality assurance program, we are confident that The Arlington Hospital provides quality care to our patients.

Sincerely,

James L. Rieder
President and CEO

Bedford County
Memorial Hospital

March 16, 1992

MEDICARE ID #490088
An Affiliate of **CARILION** *Health System*

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attention: Mr. Robert Moore

Dear Mr. Moore:

In reference to the HCFA Medicare Hospital information 1992, it is noted, upon our receipt and review that the mortality data for our hospital included 12 patients in which the timespan from the date of discharge to the date of death was greater than 180 days.

In light of the fact that our hospital is a small hospital and has a relatively low number of medicare discharges and deaths, we feel that the inclusion of 12 patients who do not meet the 180 day criteria would significantly affect our mortality rates.

We would appreciate your re-calculations of our data and correction of our mortality rate, based on removal of the 12 patients who did not die within 180 days of discharge.

Thank you.

Yours truly,

John H. Fretz
Administrator

Provider #49-0108

COMMONWEALTH of VIRGINIA

DEPARTMENT OF
MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES

B. R. WALKER, Ph.D.
Director

VOICE/TDD (804) 947-2336
FAX (804) 947-2140

CENTRAL VIRGINIA TRAINING CENTER

P.O. BOX 1098
LYNCHBURG, VIRGINIA 24505
804-947-6000

March 16, 1992

Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

The following are comments regarding Medicare Hospital Mortality Information for Central Virginia Training Center (FY 1990):

1. For FY 1990 the observed mortality rates were consistently less than the predicted mortality rates at 30, 90, and 180 days.

2. Central Virginia Training Center provides Intensive Care Services to patients requiring this service. However, this service is not separated from Medical/Surgical care for statistical reporting.

3. Due to the small number of cases for the Training Center in particular categories, there was no standard deviation assigned as it is too small for satisfactory estimation.

4. The Training Center has no cases of deaths in FY 1990 due to the nine identified procedures. However, in-patient surgery is no longer performed here.

5. The average age of (Medicare) patient death for FY 1990 was sixty-four years as compared to sixty-three years in FY 1989.

S Butkus & spell

Stanley Butkus, Ph.D.
Acting Director

/ebb

CHESAPEAKE
GENERAL HOSPITAL

March 6, 1992

Medicare Provider #490120

Gail R. Wilensky, Ph. D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attention: Robert Moore

Dear Dr. Wilensky:

Thank you for the opportunity to provide comments on the HCFA FY 1990 Medicare Mortality Data relevant to our hospital.

Chesapeake General Hospital has a JCAHO approved hospital-wide, systematic ongoing Quality Assessment and Improvement program in place. All hospital departments, members of the Medical Staff, and committees involved with the provision of patient care participate in these activities. Mortality review is one part of this process. We focus our efforts on reviewing data related to deaths occurring within the hospital, since after discharge there is no evidence regarding the circumstances in which post-discharge deaths reflect inadequate hospital care or discharge planning.

There are two matters of significance to the interpretation of this data. First, our hospital cares for an unusually high number of nursing home patients, due to our location. Second, our case mix index is the fourth highest in the Tidewater area, reflecting that, overall, our patient population has more complex medical needs than in some other hospitals our size.

Since quality of care is always of utmost concern, patient-related data received from any source is incorporated into the hospital's Quality Improvement program.

Your continued efforts to improve upon the methodologies used and interpretation of this data is greatly appreciated.

Sincerely,

Donald S. Buckley, FACHE
President

736 Battlefield Boulevard, North, Post Office Box 2028, Chesapeake, Virginia 23320 (804) 547-8121

DePaul
Medical Center
150 Kingsley Lane
Norfolk, Virginia 23505
Telephone (804) 889-5120
Fax No. (804) 489-3450

Office of the President

Medicare Provider No. 490011

The HCFA mortality data for fiscal year 1990 has been reviewed and evaluated. A total of 802 patient charts were utilized for analysis of the data relating to the seventeen conditions and procedures listed by HCFA. Sixty patients had a primary and secondary condition or procedure; resulting in 862 monitored cases. From these cases, it is worthwhile to note that 41% died in a facility/residence other than DePaul Medical Center.

Under the Procedure section, please note that the population for Angioplasties was two (2) with one patient death. This patient received emergency care, was placed on a balloon pump, and transferred to another medical facility where he subsequently died seven days post transfer.

While five of the conditions and three of the procedures are higher than the predicted rate, it should be noted that they are within the standard deviation, thereby meeting the acceptable death rates for both conditions and procedures as listed. However the goal is to continually improve care and services, therefore, each area will receive appropriate consideration.

DePaul Medical Center has an active continuing quality improvement process with all hospital and medical staff departments and divisions participating.

Currently, ten of the seventeen categories/procedures are monitored on a continuous basis as part of the Quality Enhancement Process. Two of the categories/procedures are not routinely performed at this facility. Two (2) of the remaining five (5) categories included a very small sample size with no deaths (initial pacemaker insertion and carotid endarterectomies). These will be accepted as reported. One category (Pneumonia) was greater than one standard deviation below the predicted rate therefore will remain under the current monitoring system. The remaining two areas, while still within the standard deviation for predicted rates will be added to the monitoring process, (Chronic Obstructive Pulmonary Disease and Congestive Failure), thereby providing a greater opportunity to improve care and services.

Sister Ellen Eisenberger
Sister Ellen Eisenberger
President

3-17-92
Date

FAIR OAKS HOSPITAL
FAIRFAX HOSPITAL SYSTEM

3600 Joseph Siewick Drive
Fairfax, Virginia 22033
703 391-3600

Steven E. Brown
Vice President, Fairfax Hospital System
Administrator, Fair Oaks Hospital

March 19, 1992

Health Care Financing Administration
Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: 1990 HCFA Mortality Data
#490101

ATTN: Mr. Robert Moore

Dear Mr. Moore:

On behalf of Fair Oaks Hospital, an affiliate of Inova Hospitals, we support the efforts of HCFA to release useful information to help improve the quality of care provided by our health care facilities. Further, we support the concept of a well-informed public and appreciate the opportunity to help ensure the accuracy of the mortality data to be released. However, Fair Oaks Hospital has not as of this date received the FY1990 Medicare Hospital Mortality Rate information from HCFA. The Hospital has notified HCFA that we have not received the information and HCFA agreed to assemble a new information package and mail it to us in the next couple of days. At the Hospital's request, HCFA did fax the summary sheet only for FY1988, FY1989 and FY1990. This information, however, is insufficient to comment on or verify since the supporting documentation is absent.

Regarding the summary data received, Fair Oaks Hospital is pleased that for FY1990 its overall mortality rate for all causes is within, and thus consistent with HCFA's predicted mortality rate. Also, as reported on the summary received, Fair Oaks Hospital has too few cases in each diagnostic category to yield a reliable test of significance, thus, rendering the comparison of the observed rate and predicted rate uninterpretable.

We look forward to receiving our complete information.

Sincerely,

Steven E. Brown, FACHE
Vice President, Inova Hospital
Administrator, Fair Oaks Hospital

Lee F. Smith, M.D.
President
Fair Oaks Hospital Medical Staff

FAIRFAX HOSPITAL
FAIRFAX HOSPITAL SYSTEM

3300 Gallows Road
Falls Church, Virginia 22046
(703) 698-1110

Everett M. Devaney, FACHE
Senior Vice President, Fairfax Hospital System
Administrator, Fairfax Hospital

Medicare Provider #490063

March 16, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Ms. Wilensky:

As Administrator of Fairfax Hospital, an affiliate of Inova Health System, I appreciate the opportunity to review and offer comments on HCFA's release of hospital mortality information for Fairfax Hospital.

We are pleased to note that the overall mortality rate for patients discharged from Fairfax Hospital at 30, 90 and 180 days continues to fall well below the predicted ranges for each of these time frames. These results are similar to the FY 1988 and 1989 findings reported in previous years.

In an effort to determine which of the mortality rates the conditions or procedures listed were statistically significant, and worthy of further study, we chose to determine whether any of the reported mortality rates exceeded the upper bound of the predicted range, using a 95% confidence level. The only rate that exceeds that upper limit is the 180 day rate for Chronic Obstructive Pulmonary Disease patients, and that rate exceeds it only slightly. As a tertiary care hospital, our specialty and high-risk services see patients that represent the most challenging cases. Considering that all of our rates are essentially within the 95% upper boundary, we are satisfied that these statistics are especially positive given the severity of the case mix at Fairfax Hospital.

Fairfax Hospital has an ongoing commitment to quality improvement and is proud of its tradition of excellence in patient care. We support efforts that help consumers understand the health care delivery system and the quality of care they receive.

Thank you, again, for the continuing opportunity to review and comment.

Sincerely,

Everett M. Devaney
Senior Vice President/Administrator

Franklin
Memorial
Hospital

Rayburn A. Thompson, Jr.
Administrator

March 18, 1992

An Affiliate of **CARILION** *Health System*

Medicare Provider Number 490089

Gail R. Wilensky, Ph.D., Administrator
Attention: Robert Moore
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187

Dear Dr. Wilensky:

Franklin Memorial supports the development of accurate information to be disseminated to the public regarding quality of care delivered by providers. However, we are concerned about the information in the FY 1990 HCFA Mortality Study and that this information is misleading due to flaws in the methodology of predicting mortality rates.

As examples:

1. The predicted mortality rate uses average age on admission for all Medicare beneficiaries as a factor. This was 74.7 for FMH in FY '90. However, the average age at death for those deaths assigned to FMH was over 81. This variance is not accounted for in the predicted rate.

2. Of the 108 deaths, 75 (69.4%) were patients who had "do not resuscitate" orders in the event resuscitative measures were needed. This factor is not considered in the predicted rate.

3. The case mix index for all Medicare admissions was 1.0493. The case mix index for those who died was 1.1921. Again, this variance is not accounted for in the predicted rate.

4. Of the 108 deaths, 41 (38%) were patients who came from long term care facilities or were discharged to these facilities. This is an indicator these patients were chronically ill or had a long term history of multiple health problems.

5. Of the 108 deaths, 104 (96.3%) were patients with co-morbid conditions such as cancer, heart disease, diabetes, chronic pulmonary disease, etc. This is not reflected in the predicted death rate as only a limited number of co-morbid conditions were considered in the methodology, and was based on an average of all Medicare admissions rather than those who died with the variance, once again not being taken into account.

6. Of the 108 deaths, 63 (58%) died after the admission which was considered in predicting the mortality rate. Any number of factors could change significantly subsequent to an admission such as co-morbid conditions developing, an episode of a more severe illness, admission to other health care facilities, etc. The predicted mortality rate does not allow for these issues to be considered.

The Medical Society of Virginia Peer Review Organization (MSVRO) reviewed 18.5% of the deaths on this report. All records reviewed by the MSVRO are subjected to a quality of care review. Since October 1985, including FY 1990, the MSVRO has reviewed Medicare beneficiary records at FMH without negative findings or indications that quality of care concerns exist.

The methodology to predict the mortality rates normalizes the data based on various factors (i.e. case mix index, average age, co-morbidities) at the time of admission for all beneficiaries. However, significant variances in these factors exist between the average of all admissions and the average of these same factors for only those beneficiaries who died. Each member of the normalized group may very well be materially different from one another with respect to the variances between the averages for all beneficiaries versus only those who died for the various factors used to predict mortality rates. Additionally, other important factors are not considered, e.g. number of patients with DNR orders, events which occur after an admission to which the death is tied, etc. The result is an inaccurate predicted mortality rate to which we are being compared.

We encourage HCFA to refine its methodology so that all applicable factors are appropriately considered. Otherwise, this information can be misleading and damaging to providers who in fact are providing a high level of care.

Sincerely,

Rayburn A. Thompson, Jr.
Administrator

Richard C. Kraus
Chief Executive Officer

HCA Chippenham Medical Center

Medicare Provider #490112

1990 MEDICARE MORTALITY DATA

PRESS RELEASE

The Health Care Financing Administration has released data concerning Medicare mortality rates for all hospitals. The mortality rate for Chippenham Medical Center reduced from 8.7% in 1989 to 7.5% in 1990 where death occurred within 30 days of the admission. Even though this data appears to be a positive trend, conclusions cannot be made due to many variables that affect patient mortality. Chippenham Medical Center is an acute care facility that treats many complicated and complex cases and, therefore, should not be compared with other medical facilities that offer different levels of services.

We continue to strive for excellence at Chippenham Medical Center through a dedicated ongoing quality assurance program and are committed to the delivery of high quality patient care.

Richard C. Kraus
Chief Executive Officer

7101 Jahnke Road
Richmond, Virginia 23225
Telephone (804) 320-3911
An affiliate of HCA Hospital Corporation of America

SENTARA Bayside Hospital

800 Independence Boulevard
Virginia Beach, Virginia 23455

MEDICARE PROVIDER #490119

HEALTH CARE FINANCING ADMINISTRATION
MEDICARE HOSPITAL MORTALITY DATA COMMENTS

DATA VERIFICATION:

The data used by HCFA indicates a total of 1554 Medicare patients whose last discharge between October 1, 1989 and September 30, 1990 were form Sentara Bayside Hospital. Of this total, 260 patients died within 180 days of admission to the hospital. However, of these 260 deaths, only 106 (40.8%) died while still a patient of the hospital, while 154 (59.2%) died after discharge or during a subsequent admission, not selected for review during this time frame. An additional 49 patients included in the data died greater than 180 after admission to the hospital.

Sentara Bayside Hospital is unable to verify the cause of death of those 154 patients listed as expiring after discharge as such information is not included in the patient's medical record. It is undetermined whether these deaths in any way relate to the conditions for which the patient was treated at Sentara Bayside Hospital.

Of these 106 who expired while a patient of the hospital, 6 patients (5.7%) expired on the day of admission. The overall mortality rate for those patients who expired while a patient of the hospital is 6.82%.

The Sentara Bayside Hospital observed mortality rate exceeded the predicted rate in 5 categories.

1) Acute Myocardial Infarction: of the 15 total deaths, 12 patients (80%) died while a patient of the hospital, while 3 patients (20%) died after discharge. The number of cases is too small for satisfactory estimation of statistical significance.

2) Congestive Heart Failure: Of the 20 total deaths, 7 patients (35%) died while a patient of the hospital, while 13 patients (65%) died after discharge. At a 95% confidence level, the upper range of the predicted mortality rate at 30 days is 14.4 to 28.8%: the upper range of the predicted mortality rate at 90 days is 23.1 to 41.61%; the upper range of predicted mortality rate at 180 days is 29.4 to 87.31%. Sentara Bayside Hospital is within the predicted range in all categories.

3) Sepsis: Of the 11 total deaths, 8 patients (72.7%) died while a patient in the hospital, while 3 patients (27.3%) died after discharge. The number of cases is too small for satisfactory estimation of statistical significance.

4) Open Reduction of Hip Fractures: Of the 4 total deaths, 3 patients (75%) died while a patient in the hospital, while 1 patients (25%) died after discharge. The number of cases is

SENTARA
Bayside Hospital

800 Independence Boulevard
Virginia Beach, Virginia 23455

MEDICARE PROVIDER #490119

too small for satisfactory estimation of statistical significance.

5) Prostatectomy: Of the 2 total deaths, 0 patients (0%) died while a patient in the hospital, while 2 patients (100%) died after discharge. At a 95% confidence level, the upper range of the predicted mortality rate at 30 days is 0.9 to 3.79%: the upper range at 90 days is 2.2 to 6.5%; the upper range for 180 days is 3.8 to 10.26%. Sentara Bayside Hospital is within the predicted range in all categories.

INTERPRETIVE REMARKS:

Sentara Bayside Hospital continues to question the pertinence of this reported data especially in classifying and attributing responsibility for those deaths occurring outside of the hospital. It is maintained that the Medicare Mortality Release does not, in and of itself, indicate the quality of care provided at this hospital.

Sentara Bayside Hospital offers medical, surgical, and emergency services to acutely ill patients in the Hampton Roads area, and receives referrals from a wide geographic area including the Eastern Shore of Virginia, other Virginia localities, and Northeastern North Carolina. The severity of illness of those patients treated at this facility is recognized by HCFA in our assigned acuity index of 1.3101 in the Federal Fiscal Year 1990. The average Medicare patient has a predicted acuity of 1.0.

As part of the Medical Staff Quality Assurance Program for Sentara Bayside Hospital, all hospital deaths are reviewed within the respective Medical Staff departments on a monthly basis.

E. L. Berdick

Edward L. Berdick, President

JEFFERSON HOSPITAL
FAIRFAX HOSPITAL SYSTEM

4600 King Street
Alexandria, Virginia 22302
703 931-9700

Richard A. Levy, Jr.
Vice President, Fairfax Hospital System
Administrator, Jefferson Hospital

490008

March 16, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Dear Dr. Wilensky:

We appreciate this opportunity to review the Medicare Hospital Mortality Analysis. The Administration and Medical Staff of Jefferson Hospital enthusiastically support quality measurement efforts such as this.

We are pleased to note, as we have for the past five years, that our mortality rates fall within or below the ranges predicted by the Health Care Finance Administration (HCFA) model. The Jefferson Hospital Medical Staff recognizes, nevertheless, that only peer review of the actual care provided can indicate whether that care was appropriate and of high quality, and remains committed to a Quality Assurance Program which includes review of all hospital deaths.

Again, we appreciate this opportunity to review and comment.

Sincerely,

Richard Levy

Richard A. Levy, Jr.
Administrator

RAL:mzm

John Randolph HOSPITAL

#490020

March 18, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attn: Robert Moore

We are in receipt of the mortality rates pertaining to John Randolph Hospital, Hopewell, Virginia. In reviewing the statistics published, we note that our percentage of mortality is within your published range of acceptable predicted rates. The Medical Staff at John Randolph Hospital has been active in reviewing all mortalities in the respective department audit committees. For many years there has been an ongoing cooperative effort between physicians and hospital administration to assure that the citizens of our community obtain the very best of care.

We appreciate receiving this data in advance of its press release and the opportunity to respond.

Sincerely,

William Caldwell

William Caldwell
Administrator

WC/bg

411 West Randolph Road • P.O. Box 971 • Hopewell, Virginia 23860 • 804-541-1600

Supporting our region's healthcare as part of the SunHealth network.

Medicare Number 490017

March 18, 1992

MARYVIEW MEDICAL CENTER
Bon Secours Health System

Maryview Hospital
Maryview Psychiatric Hospital
Martha W. Davis Cancer Center
Maryview Wellspring Home Care
Maryview Nursing Care Center

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Dear Dr. Wilensky,

On behalf of Maryview Medical Center, I thank you for the opportunity to comment on the mortality data prepared by HCFA. As noted by HCFA last year, we acknowledge that this information is not a singular measurement of quality. The data does provide information which is not available from other sources, however.

In the "All Causes" category of data, Maryview's observed mortality rate is higher than that predicted by HCFA's model. We are eager to understand this difference, and our analysis is continuing. Mortality review is an important part of quality review at our facility. The HCFA data will be used to further understand our mortality experience and also to evaluate the way we address mortality review.

The availability of selected factors affecting the predicted mortality rate is helpful. Although not the main focus of our analysis, we have identified a systems issue which may have artificially lowered the predicted mortality rates in our sample.

Maryview Medical Center takes health care seriously. Our efforts were recognized last year when the Joint Commission for Accreditation of Healthcare Organizations awarded Maryview its highest level of accreditation, Accreditation with Commendation. We are driven to reflect Christian caring for all persons and to alleviate human suffering.

HCFA's efforts to refine its model are applauded.

Sincerely,

Nora M Paffrath

Nora M. Paffrath
Senior Vice President/Operations

3636 High Street, Portsmouth, Virginia 23707 804/398-2200

Memorial Hospital
of Martinsville & Henry County

Medicare Provided Number: 490079

March 16, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

ATTN: Robert Moore

Dear Ms Wilnesky:

This letter is in reply to your letter of February 28, 1992 concerning planned publication of selected 1990 Medicare patient mortality information for patients treated in this hospital. Memorial Hospital of Martinsville and Henry County is the only hospital in its city/county primary service area of 73,104 population. It also serves patients from four surrounding counties, especially Patrick County, Virginia, to the West, which has 17,473 population. MHMHC is categorized as a Medicare Rural Referral Hospital because of its inpatient volume, patient mix, and number and types of medical staff specialists. It operates an emergency department, chemotherapy cancer program, a hospice program, an obstetrical and pediatric service, a psychiatric unit, two intensive care units, and other services generally found in full service community hospitals. There are two intermediate care nursing home facilities in Martinsville, with a total licensed capacity of 442 beds, a similar facility in Stuart, Patrick County, Virginia with 130 licensed beds and 56 additional beds in Bassett, Henry County, Virginia. The point made here, is that there is a concentration of elderly patients in this area, many of whom come to this hospital when hospitalization is required.

We feel there are several factors not taken into consideration in the mortality data which can skew statistics:

1. Patients' and families' expectations of outcomes during and following hospitalization such as the use of "Do not Resuscitate" status and/or living wills. In the two

320 Hospital Drive • P.O. Box 4788 • Martinsville, Virginia 24115-4788 • Telephone: (703) 666-7200

specific categories in which Memorial Hospital fell outside the predicted range, 22.2% of the patients expiring documented a "do not resuscitate" or "natural death act" status.

2. The greater the amount of time from admission to the time of death, the less reliable it is to relate the death to the assigned category or procedure in question. It was noted that one death included in Memorial Hospital's statistics occurred 243 days after discharge which is greater than the 180 day boundary the statistics should be limited to.

3. The validity of data interpretation is questionable when the case sampling for the category is so small it eliminates the provision of a standard deviation. Such was the case for the two categories in which the hospital fell outside the predicted range.

4. Age appears to be of limited consideration in the mortality statistics. Although 74 has been used by HCFA to identify the average patient age at admission to Memorial Hospital of Martinsville, it is noted that the age for up to 33% of the deaths occurring in two major categories was 80 years or greater.

We are happy to note that the actual mortality rates for all causes for MHMHC fell within the range of predicted mortality rates. HCFA's mortality data will be shared with the hospital's Board of Trustees, the Medical Staff and the Quality Assessment Committee. Our Medical Staff continues a review of hospital deaths as a piece of their monitoring process.

Sincerely,

Clyde L. Britt

Clyde L. Britt
Executive Director

CLB:ntm

MOUNT VERNON HOSPITAL
FAIRFAX HOSPITAL SYSTEM

2501 Parker's Lane
Alexandria, Virginia 22306
703 664-7000

Stephen C. Rupp
Vice President, Fairfax Hospital System
Administrator, Mount Vernon Hospital

Medicare Provider #490122

March 17, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Ms. Wilensky:

As the Administrator of Mount Vernon Hospital, I support the efforts to enhance consumer understanding of the health care delivery system and the quality of care they receive.

DATA INTERPRETATION:

I would like to note the following observations:

1. Mount Vernon Hospital is not routinely informed of death post-discharge. Therefore, it was not possible to verify or review the cause of deaths which HCFA reports as occurring after discharge.

2. Of the deaths noted by HCFA, 138 patients died after their last discharge date at Mount Vernon Hospital. Those patients were discharged to the following destinations:

82	Discharged home
6	Another acute care facility
11	Skilled care facility
24	Intermediate care facility
9	Home Care follow-up
6	Other institutions

15 YEARS OF QUALITY... CARING FOR OUR COMMUNITY

Medicare Provider #490122

Although each of these Medicare mortality cases had been previously reviewed by our staff, Mount Vernon Hospital has re-examined these cases and is again satisfied that the quality of care provided was appropriate. This information can be used to complement our ongoing quality assurance program which routinely includes review of all deaths in the hospital, not just Medicare cases.

We are pleased that Mount Vernon Hospital's numbers are within the predicted ranges where the numbers are high enough to make a precise interpretation.

We appreciate this opportunity to comment on this data.

Sincerely,

Stephen C. Rupp
Administrator

/ln
mort.92

850 Crawford Parkway
Portsmouth, Virginia 23704
804.398.4000
804.398.4353 FAX

PORTSMOUTH
GENERAL HOSPITAL
A Tidewater Health Care Facility

Medicare Provider Number: 490074

March 17, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187
ATTN: Robert Moore

Dear Mr. Moore:

We would like to take this opportunity to voice our concerns about the presentation of data provided by the 1990 Medicare Hospital Mortality Information. Whereas we agree that it is important to collect accurate and quantifiable information concerning mortality, it is a concern to us that the information may be difficult to understand for those without a working knowledge of statistics. We are particularly sensitive to the release of statistical data about categories for which the number of cases is so small that standard deviations could not be calculated.

The 30, 90 and 180 days mortality rates are very interesting and useful for in-house analysis, however, the press or other casual observer may interpret these statistics incorrectly. The possibility exists that factors outside the hospital's sphere of control may have contributed to an individual's death (such as accidents, alcohol abuse, cigarette smoking, poor follow-up care at home, etc). In previous years, we have found several cases of patients who were discharged with the diagnosis reported by Medicare, but who ultimately expired of totally unrelated causes, thereby skewing the observed rate reported by HCFA.

Although it was impractical for our staff to discover the actual cause of death for every Medicare patient reported in Enclosure D for fiscal year 1990, we did find that some of our patients expired of causes not captured in the report. For instance: one

Medicare Provider Number: 490074

of our cholecystectomy patients was found later to have expired of cardiac arrest, and another cholecystectomy patient was found to have gastric and biliary outlet obstruction caused by carcinoma of the pancreas and metastasis to the liver. Portsmouth General Hospital also admitted a woman with a hip fracture who underwent an open reduction of her hip fracture (as reported in Enclosure D), but she expired due to cardiopulmonary arrest. We feel that these conditions were not taken into consideration when calculating the observed rates for these categories.

Thank you for your attention. The mortality information provided by HCFA will be integrated with our broader quality assurance program, as Portsmouth General Hospital is committed to continuous quality improvement. If you have any questions concerning our comments, please contact Lori Pycior Wright at (804) 496-6250.

Sincerely,

Carl F. Medley

CARL F. MEDLEY
Administrator

Potomac Hospital

Potomac Hospital
2300 Opitz Boulevard
Woodbridge, Virginia 22191
Medicare Provider Number
490113

March 16, 1992

Gail R. Wilensky, Ph.D.
Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
Attn: Robert Moore

Re: Potomac Hospital, Woodbridge, Virginia

Dear Dr. Wilensky:

Potomac Hospital is in receipt of its federal fiscal year ("FY") 1990 mortality data from the Health Care Financing Administration ("HCFA") for inclusion in the Medicare Hospital Information Report -- 1992. Pursuant to HCFA's instructions, the Hospital submits the following comments.

Potomac Hospital is, of course, pleased that its observed mortality rate for Medicare beneficiaries admitted to the Hospital was within two standard deviations of its predicted mortality rate for those admissions at 30, 90, and 180 days post admission, respectively. The Hospital is not pleased, however, that their mortality information, which HCFA intends to publish later this year for public dissemination, contains inaccurate data which understates the predicted mortality rate for Potomac Hospital's Medicare admissions.

You were specifically advised by our letter of October 28, 1991 and by letter from the Hospital's legal counsel of January 16, 1992, that the Medicare admission data from the Hospital for FYs 1989, 1990, and 1991, utilized by HCFA in compiling its annual mortality report, contained erroneous information. Due to a deficiency in the Hospital computer software for billing for this period, admissions to the Hospital which were "Emergency" were inappropriately coded as "Elective." Enclosure C of the data submitted for our review corroborates the point we made in our earlier correspondence. Page 119 of Enclosure C reports 0.1% as Emergency admissions for FY 1990.

Potomac Hospital
2300 Opitz Boulevard
Woodbridge, Virginia 22191
Medicare Provider Number
490113

This computer problem was identified by the Hospital's outside consultants and has been determined to have a dramatic effect on the predicted mortality rate for Medicare beneficiaries admitted to the Hospital. For example, for FY 1989, the Hospital's observed mortality rate was comparable to virtually all similar hospitals in the surrounding geographic area, but its predicted mortality rate was substantially lower. When the computer error, noted above, is corrected to reflect the accurate source of patient admission, the predicted mortality rate for FY 1989 increases from 7.2% to 9.2% at 30 days.

Because the 1990 HCFA data tapes are not available at this time, we cannot calculate the impact of this error on the FY 1990 data contained in the current mortality report. It is, however, absolutely clear that the Hospital's predicted mortality rate for Medicare admissions would have been significantly higher with the correct data -- and thus significantly closer to, and perhaps above, the Hospital's observed mortality rate.

Accordingly, Potomac Hospital objects to the inclusion of its mortality information for Medicare admissions during Federal FY 1990 which includes data demonstrated by the Hospital to be erroneous. As we have advised you, this problem recurs for the Hospital's FY 1991 data which has already been reported to the fiscal intermediary and to HCFA. We have formally requested that HCFA accept corrected data for these time periods, that HCFA verify that data if necessary, and have offered to bear the administrative costs for such activities, all with no satisfactory response from HCFA to date.

Potomac Hospital agrees with the basic purposes of the Medicare Hospital Information Report but submits that it is absolutely essential that HCFA include only accurate data. Moreover, we submit that it is reckless of HCFA to publish data which is demonstrated to be erroneous, particularly in light of the potentially devastating consequences for Potomac Hospital.

In conclusion, Potomac Hospital requests that HCFA correct its FY 1990 Medicare admission data prior to final publication of the Medicare Hospital Information Report -- 1992 later this year. We also request the correction of similar data for FY 1991, which is scheduled for publication later in 1992. We will continue to pursue with you and your staff the prompt correction of this data to ensure that only accurate information is disseminated to the public to assist them in making educated choices about health care.

Sincerely,

William M. Moss
President

WMM:jl

THE RETREAT HOSPITAL

CHARLES W. MACK
PRESIDENT

March 19, 1992

Provider #490071

Gail R. Wilensky, Ph.,D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building'
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attention: Mr. Robert Moore

Dear Mr. Moore:

In response to the HCFA Mortality Study for fiscal year 1990 (representing those charts selected/received for processing in 1990), we would like to make the following reply.

Due to the heavily restrictive criteria imposed by all third-party payors for in-house hospital stays, greater mortality rates are certainly to be expected. The patients are much sicker upon admission, and usually have multiple chronic medical problems.

However, after careful study of the statistics, we were pleased that actual in-house care reflected such a small percentage of deaths - a total of 32 percent of the 360 deaths in the selective 1975 cases studied.

The number of deaths attributed to Retreat, but did not die here, could be misleading in that 57 (15.6%) of the patients died greater than six months after their last contact with Retreat. There were a total of 245 (68%) deaths attributed to Retreat after their last contact with the hospital, ranging from less than 30 days to greater than six months, several greater than eleven months.

The average age of our patients who died was 77.9 years, several years older than the national average. Although death is inevitable, our emphasis is on improving health as much as possible. The lack of quality problems found at our hospital (none) reflect favorably in the care we give our patients.

2621 GROVE AVENUE • RICHMOND, VIRGINIA 23220-4308 • (804) 254-5100

Provider #490071

Retreat has strengthened the ancillary departments with special emphasis on cardiovascular and pulmonary rehabilitation services to enhance the quality of life of our older population with their chronic problems.

As well, Retreat Hospital has attracted patients to our strong Hospice Program, when comfort has become their primary concern.

With Retreat's emphasis on the Care Program, Quality Improvement, and Patient's Rights, all of us are working together for the betterment of our patients. We are justly proud of our quality status in the medical community, and will continue to strive for the best possible quality care.

Sincerely,

Charles W. Mack

Charles W. Mack
President

CWM:bas

SENTARA
Hampton General Hospital

3120 Victoria Boulevard
Hampton, Virginia 23669-0640
804-727-7000

Medicare Provider Number: 490093

SENTARA HAMPTON GENERAL HOSPITAL
FISCAL YEAR 1990 HCFA MORTALITY DATA

COMMENTS

DATA VERIFICATION:

The data utilized by HCFA indicates that during the time period of October 1, 1989 through September 30, 1990, there was a total of 2155 Medicare patients whose last discharge was from Sentara Hampton General Hospital. The overall mortality rate for those patients who expired while a patient of the hospital is 3.6%. The average patient age of mortalities was 69 years.

The Sentara Hampton General Hospital observed mortality rate exceeded the predicted rate in five categories:

Acute Myocardial Infarction:

Of the 14 total deaths, 12 patients (85.7%) died while a patient of the hospital, while 2 patients (14.3%) died after discharge.

Congestive Heart Failure:

Of the 37 total deaths, 18 patients (48.6%) died while a patient of the hospital, while 19 patients (51.4%) died after discharge.

Pneumonia/Influenza:

of the 21 total deaths, 14 patients (77.7%) died while a patient of the hospital, while 7 patients (33.3%) died after discharge.

Medicare Provider Number 490093

Stroke:

Of the 26 total deaths, 12 patients (46%) died while a patient of the hospital, while 14 patients (54%) died after discharge.

Sepsis:

Of the 10 total deaths, 4 patients (40%) died while a patient of the hospital, while 6 patients (60%) died after discharge.

INTERPRETIVE REMARKS:

Sentara Hampton General Hospital continues to disagree with the use of mortality data as a "quality" indicator. Sentara Hampton General Hospital questions the pertinence of this reported data especially in classifying and attributing responsibility for those deaths occurring outside of the hospital. It is maintained that the Medicare Mortality Release does not, in and of itself, indicate the quality of care provided at this hospital. The public release of mortality data is likely to result in unfair and erroneous conclusions about hospitals.

Sentara Hampton General Hospital offers medical, surgical, and emergency services to acutely ill patients on the Peninsula. The severity of illness of Medicare patients treated at Sentara Hampton General Hospital is recognized by HCFA in our assigned acuity index of 1.2800 in Federal Fiscal Year 1990, 1.2753 in Federal Fiscal Year 1989, and 1.2400 in Federal Fiscal Year 1988. The average Medicare patient has a predicted acuity level of 1.0.

Sentara Hampton General Hospital supports the notion of continuous quality improvement. As part of the Medical Staff Quality Assurance Program for Sentara Hampton General Hospital, all hospital deaths are reviewed within the respective medical staff departments on a monthly basis.

Diana L. LoVecchio, Vice President

SENTARA
Leigh Hospital

830 Kempsville Road
Norfolk, Virginia 23502
804-466-6000

MEDICARE PROVIDER # 490046

HEALTH CARE FINANCING ADMINISTRATION
MEDICARE HOSPITAL MORTALITY DATA COMMENTS

DATA VERIFICATION:

The data used by HCFA indicates a total of 2725 Medicare patients whose last discharge between October 1, 1989 and September 30, 1990 were from Sentara Leigh Hospital. Of this total, 406 patients died within 180 days of admission to the hospital. However, of these 406 deaths, only 170 (41.9%) died while still a patient of the hospital, while 236 (58.1%) died after discharge or during a subsequent admission, not selected for review during this time frame.

Sentara Leigh Hospital is unable to verify the cause of death of those 236 patients listed as expiring after discharge as such information is not included in the patient's medical record. It is undetermined whether these deaths in any way relate to the conditions for which the patient was treated at Sentara Leigh Hospital.

Of those 170 patients who expired while a patient of the hospital, 16 (9.4%) expired within the first 24 hours of admission and 10 patients (5.9%) expired on the day of admission. The overall mortality rate for those patients who expired while a patient of the hospital is 6.24%.

The Sentara Leigh Hospital observed mortality rate exceeded the predicted rate in eight categories:

1) Pneumonia/Influenza: Of the 21 total deaths, 14 patients (66.7%) died while a patient of the hospital, while 7 patients (33.3%) died after discharge. At a 95% confidence level, the upper range of the predicted mortality rate at 30 days is 14.0 to 21.3%; the upper range of the predicted mortality rate at 60 days is 19.5 to 28.0%. Sentara Leigh Hospital is within the range at 30 and 60 days, and below the predicted rate at 180 days.

2) Chronic Obstructive Pulmonary Disease: Of the 13 total deaths, 6 patients (46.2%) died while a patient of the hospital, while 7 patients (53.2%) died after discharge. At a 95% confidence level, the upper range of the predicted mortality rate at 30 days is 6.2 to 13.8%; the upper range at 60 days is 11.4 to 21.4%; the upper range at 90 days is 15.8 to 31.2%. Sentara Leigh Hospital is within the predicted range in all categories.

3) Transient Cerebral Ischemia: Of the 4 total deaths, 1 patient (25%) died while a patient of the hospital, while 3 patients (75%) died after discharge. The number of cases is too small for satisfactory estimation of statistical significance.

4) Hip Fracture: Of the 14 total deaths, 5 patients (35.7%) died while a patient of the hospital, while 9 patients (64.3%) died after discharge. At a 95% confidence level, the upper range of the predicted mortality rate at 30 days is 6.7 to 20.1%; the upper range at 60 days is 12.3 to 27.6%; the upper range at 180 days is 16.3 to 32.3%. Sentara Leigh Hospital is within the predicted range in all categories.

5) Sepsis: Of the 10 total deaths, 8 patients (80.0%) died while a patient of the hospital, while 2 patients (20%) died after discharge. The number of cases is too small for satisfactory estimation of statistical significance.

SENTARA
Leigh Hospital

830 Kempsville Road
Norfolk, Virginia 23502
804-466-6000

MEDICARE PROVIDER # 490046

6) Angioplasty: There was only one death in this category.

7) Hip Replacement/Reconstruction: Of the 6 total deaths, 3 patients (50%) died while a patient of the hospital, while 3 patients (50%) died after discharge. At a 95% confidence level, the upper range of the predicted mortality rate at 30 days is 1.6 to 3.6%; the upper range at 60 days is 3.0 to 7.8%; the upper range at 90 days is 4.1 to 9.1%. Sentara Leigh Hospital is within the predicted range in all categories.

8) Open Reduction of Hip Fracture: Of the 7 total deaths, 2 patients (28.6%) died while a patient of the hospital, while 5 patients (71.4%) died after discharge. The number of cases is too small for satisfactory estimation of statistical significance.

The 1990 Medicare Report reflects one case under coronary artery bypass graft. Sentara Leigh Hospital does not offer this service. This patient was a patient at Sentara Norfolk General Hospital.

INTERPRETIVE REMARKS:

Sentara Leigh Hospital continues to question the pertinence of this reported data especially in classifying and attributing responsibility for those deaths occurring outside of the hospital. It is maintained that the Medicare Mortality Release does not, in and of itself, indicate the quality of care provided at this hospital.

Sentara Leigh Hospital offers medical, surgical, and emergency services to acutely ill patients in the Hampton Roads area, and receives referrals from a wide geographic area including the Eastern Shore of Virginia, other Virginia localities, and Northeastern North Carolina. The severity of illness of those patients treated at this facility is recognized by HCFA in our assigned acuity index of 1.3460 in Federal Fiscal Year 1990, 1.2791 in Federal Fiscal Year 1989, and 1.2477 in Federal Fiscal Year 1988. The average Medicare patient has a predicted acuity level of 1.0.

As part of the Medical Staff Quality Assurance Program for Sentara Leigh Hospital, all hospital deaths are reviewed within the respective medical staff departments on a monthly basis.

Roger Pittelman

Roger Pittelman, Administrator

VHA.
Member of Voluntary Hospitals of America, Inc.

HOSPITAL I.D. 490007

SENTARA NORFOLK GENERAL HOSPITAL
HEALTH CARE FINANCE ADMINISTRATION
MEDICARE HOSPITAL MORTALITY DATA

COMMENTS

DATA VERIFICATION:

The data utilized by HCFA indicates that during the time period of October 1, 1988 through September 30, 1990, there were a total of 4,383 Medicare patients whose last discharge was from Sentara Norfolk General Hospital. Of this total, 994 patients expired within 180 days of admission to the hospital. However, of these 994 deaths, only 328 (33%) expired while still hospitalized, while 666 (67%) expired after discharge or during a subsequent admission, not selected for review during this time period.

Sentara Norfolk General Hospital is unable to verify the cause of death of those 666 patients listed as expiring after discharge. It remains undetermined whether these deaths in any way relate to the conditions for which the patient was treated while at Sentara Norfolk General Hospital. The inpatient medical record does not contain information relating to the patient's death if the death occurs after discharge.

Of those 328 patients who expired while a patient of the hospital, 30 patients (9.1%) expired within the first 24 hours of admission and 8 patients (2.4%) expired on the day of admission. The overall mortality rate for those patients who expired while a patient of the hospital is 7.48%.

The SNGH observed mortality rate exceeded the predicted rate in five categories. However, none of the following conditions had sufficient cases to permit satisfactory estimation of statistical significance.

1) **Transient Cerebral Ischemia:** Of the 4 total deaths, all patients (100%) expired after discharge.

2) **Hip Fracture:** Of the 10 total deaths, 5 patients (50%) expired while a patient of the hospital, while 5 patients (50.0%) expired after discharge. This category, as well as the "Open Reduction of Hip Fracture" category (see #5 below) has duplicate patient information. There were five cases in which the patient had both the hip fracture diagnosis and the open reduction of hip fracture procedure. The deaths are recorded twice; one per category.

3) **Chronic Obstructive Pulmonary Disease:** Of the 10 total deaths, 5 patients (50%) expired while a patient of the hospital, while 5 patients (50%) expired after discharge.

4) **Hip Replacement/Reconstruction:** Of the 5 total deaths only 2 patient (40%) expired while a patient in the hospital while 3 patients (60%) expired after discharge.

5) **Open Reduction of Hip Fracture:** Of the 4 total deaths, only 2 patient (50%) expired while a patient of the hospital, while 2 patients (50%) expired after discharge.

INTERPRETIVE REMARKS:

Sentara Norfolk General Hospital mortality rates compared favorably in 1989 and 1988 with the data supplied by HCFA. In depth analysis is not possible as the data detail for these years was not provided. Sentara Norfolk General Hospital continues to question the pertinence of this reported data especially in classifying and attributing responsibility for those deaths occurring outside of the hospital. It is maintained that the Medicare Mortality Release does not, in and of itself, indicate the quality of care provided at this hospital.

Sentara Norfolk General Hospital is a private, not for profit hospital with 644 beds. Sentara Norfolk General Hospital provides a complex range of health care services to the most acutely ill patients in the Hampton Roads area and receives referrals from a wide geographic area including the Eastern Shore of Virginia, Virginia localities south of Richmond, and Dare County and Northeastern North Carolina. Sentara Hospital has one of the five state-designated Level 1 Trauma Services within the State of Virginia and is supported by a hospital based air ambulance. Other services offered in the area only by Sentara Norfolk General Hospital include the Burn Unit, Organ/Tissue Transplant, Acute Cardiac Intervention, a Neuro Intensive Care Unit, Invitro Fertilization, Hospice and High Risk Obstetrics. Sentara Norfolk General Hospital also has the largest and most sophisticated cardiac program and radiation oncology program in the area.

These programs and the severity of illness of patients treated at this tertiary care center are recognized by HCFA in our assigned acuity index of 1.80 in Federal Fiscal Year 1990, 1.69 in Federal Fiscal Year 1989, 1.67 in Federal Fiscal Year 1988 and 1.57 in Federal Fiscal Year 1987. This level of acuity is the second highest in the state of Virginia. The average Medicare patient has an acuity level of 1.0.

As part of the Medical Staff Quality Assurance Program for Sentara Norfolk General Hospital, all hospital deaths are reviewed within the respective Medical Staff Departments on a monthly basis.

Provider
#490059

BON SECOURS –
ST. MARY'S HEALTH CORPORATION

VIA OVERNIGHT MAIL

March 18, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

ATTN: Robert Moore

Dear Mr. Moore:

St. Mary's Hospital is pleased to have the opportunity to comment on the 1990 Medicare Hospital Mortality Data. We agree with the publication of quality data and are pleased with the effort HCFA has put into improving the quality of the data and the format to include graphic presentation.

We find our data relative to **HOSPITAL CHARACTERISTICS** to be correct with the following exceptions:

- While we had 369 beds in operation, we are licensed for 401. The difference is explained by the 32 psychiatric beds which were at one time under a separate license.

- While our specialty beds are listed accurately, we would like to include that we have an active Burn program, while not a burn unit.

- We also have a Pediatric ICU as well as a Neonatal ICU.

In terms of the **FISCAL YEAR 1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES** and the **ADMISSION SOURCES/TYPES**, we have a large number of admissions from Skilled Nursing Homes, due to the fact that we are centrally located between four (4) skilled nursing homes. These are patients that represent a high level of severity and complexity. We have not chosen to validate case data as we have found it to be accurate on past spot audits. We also find the statistics listed to be in agreement with our own.

With regard to specific **MORTALITY RATES**, the St. Mary's data shows a slight elevation of the observed mortality rate over the predicted for the conditions of COPD and hip fractures.

- In the area of COPD, we have a large, active group of pulmonary physicians who accepts referral from many small, rural community hospitals and physicians when the patient is in need of more specialized care. This has the effect of increasing the severity level of our COPD patients.

- In the case of hip fractures, our admissions from the four surrounding nursing homes and numerous home health programs yield a very fragile population. Patients may have pinnings to stabilize the fracture if they are in suitable condition for surgery.

There are occasions when these patients do not do well in surgery and are appropriately managed with comfort measures and allowed to die peacefully as they and the family wish. These cases, as well as all deaths that occur while patients are hospitalized, have been reviewed by the physician consulting groups within each department of the medical staff. All cases were found to have been appropriately managed.

In general, we support the data release and the continuous improvement shown in the information. Continued appropriate use of quality data will assist the consumers of health care in their selection of providers.

Sincerely,

Chris Carney

Christopher M. Carney
Chief Executive Officer

CMC/mll

1060 First Colonial Road
Virginia Beach, Virginia 23454
804.481.8000

VIRGINIA BEACH
GENERAL HOSPITAL
A Tidewater Health Care Facility

Medicare Provider Number: 490057

March 11, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187
ATTN: Robert Moore

Dear Mr. Moore:

We would like to take this opportunity to voice our concerns about the presentation of data provided by the 1990 Medicare Hospital Mortality Information. Whereas we agree that it is important to collect accurate and quantifiable information concerning mortality, it is a concern to us that the information may be difficult to understand for those without a working knowledge of statistics. We are particularly sensitive to the release of statistical data about categories for which the number of cases is so small that standard deviations could not be calculated.

The 30, 90 and 180 days mortality rates are very interesting and useful for in-house analysis, however, the press or other casual observer may interpret these statistics incorrectly. The possibility exists that factors outside the hospital's sphere of control may have contributed to an individual's death. In previous years, we have found several cases of patients who were discharged with the diagnosis reported by Medicare, but who ultimately expired of totally unrelated causes, thereby skewing the observed rate reported by HCFA.

The information provided by HCFA also does not take into account the fact that many patients are known to be terminal when they are admitted. For example, approximately half of the Medicare Chronic Obstructive Pulmonary Disease patients who expired at Virginia Beach General Hospital during fiscal year 1990 were

Medicare Provider Number: 490057

known to be terminal upon admission; several of them wished for comfort measures only and requested that no heroic efforts be made to prolong their lives.

Thank you for your attention. The mortality information provided by HCFA will be integrated with our broader quality assurance program, as Virginia Beach General Hospital is committed to continuous quality improvement. If you have any questions concerning our comments, please contact Lori Pycior Wright at (804) 496-6250.

Sincerely,

Robert L. Graves
Administrator

WINCHESTER
MEDICAL
CENTER
A Subsidiary Of Winchester Regional Health Systems

March 19, 1992 Medicare No. 490005

Gail R. Wilensky, Ph.D., Administrator
ATTN: Mr. Robert Moore
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187

Dear Mr. Moore:

The HCFA sampling technique which reports on 56% of Winchester Medical Center's cases erroneously reflects the institution's mortality rates. A 100% reporting of all Winchester Medical Center cases reflecting the true mortatliy rates for 0-30 days is as follows:

DIAGNOSIS	# CASES	DEATHS	%
Acute MI	206	32	15.5
CHF	384	45	11.7
Pneumonia/Influenza	201	23	11.4
COPD	127	7	5.5
TIA	64	2	3.1
Stroke	188	23	12.2
Hip Fracture	100	1	1.0
Sepsis	87	19	21.8
PROCEDURES:			
Angioplasty (PTCA)	86	4	4.7
CABG	141	13	9.2
Pacemaker Insertion	46	3	6.5
Carotid Endarterectomy	15	0	0.0
Hip Replacement	178	1	.6
Open Reduction FX Hip	38	0	0.0
Prostatectomy	92	0	0.0
Cholecystectomy	47	2	4.3
Hysterectomy	26	0	0.0

David W. Goff
President

DWG/mt

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